CAT CREW, INC. THECREW@CATCREW.ORG 610-825-9471

RETURN APPLICATION BY MAIL TO: 600 APPLE ST., WEST CONSHOHOCKEN, PA 19428 OR EMAIL TO: thecrew@catcrew.org

Instructions: Thank you for your interest in adopting from Cat Crew. Please complete and sign the application. All applicants must have a vet reference or be willing to have a house check. If the adoption is approved, the applicant will be notified in 48 hours. All adoptions are done on a trial basis. All cats must be taken home in carriers.

ONLY COMPLETE/LEGIBLE APPLICATIONS CONSIDERED

Where did you see or hear abo Your Name: Spouse or Housemate Name: Address: Home Phone:	out this pet? Work Phone:	Cell Phone:	
Email Address: Driver's License # or other form of ID:			
Do you own or rent? How long have you lived at your current residency?			
What is your occupation and place of work?			
Who will care for your pet when you are away?			
How many children do you have? What are their ages?			
Do you plan to declaw?			
Is this pet a gift? If so, what is their name and address?			
Tells us about the pets you currently have or had in the past.			
What is the name and phone # of your vet? What is the name on the vet records?			
Where will this pet be kept?	Indoor	Indoor/Outdoor	
Adoption Agreement – Please initial each item and sign the agreement. I agree to provide adequate food, shelter and veterinary care for this pet. If I cannot keep the pet, I agree to return the pet to Cat Crew. I agree to neuter/spay the pet, if not already performed. I understand that Cat Crew is a non-profit, rescue group and as such, cannot guarantee the health of any pet. I agree to take the pet to the vet immediately. If there is a health problem, I agree to return the pet to Cat Crew directly. If I wish to keep the pet, I do not hold Cat Crew responsible for the cost of continued veterinary care.			
Signature			
Donation: Rec Followup call #1:		up Letter: Entered in DB: vup call #2:	