Miss Fannie’s Friends

Application for: (Name of Cat)

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

P.O. Box 9021 Wichita Falls, TX 76308

[missfanniesfriends@gmail.com](mailto:missfanniesfriends@gmail.com)

Application for Pet Adoption

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you have a dog door? \_\_\_\_\_\_\_\_\_\_\_\_\_

**Type of housing**: Apt/Condo\_\_\_\_\_ House\_\_\_\_\_ Other\_\_\_\_\_ **Rent or Own**: \_\_\_\_\_\_\_\_\_\_

**IF YOU RENT:** (Landlord’s Permission in Writing Must be Provided)

Landlord\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (Home/Cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Applicant:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of people in household \_\_\_\_\_\_\_\_\_\_\_\_\_ Are any family members allergic to pets? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

If children are in household, please list all ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List all animals you currently own and have owned in the **past 10 years**:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name | Cat | Dog | Sex | Breed and age | Date of last vaccinations | Spayed /  Neutered ? | Where is Pet Now? |
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Who will be responsible for the veterinary costs of caring for your new pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterinarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please Initial Each Question if you agree:**

**\_\_\_\_\_\_ Our Policy with cats is they must be indoor pets only. Do you agree with this?**

**\_\_\_\_\_\_ Our Policy is that our cats will not be declawed. Do you agree with this?**

**\_\_\_\_\_\_ Are you prepared to allow time for your new pet to adjust to your home?**

**\_\_\_\_\_\_ Do you agree to a follow up home visit within 1 to 6 months after adoption?**

**\_\_\_\_\_\_ Do you agree to follow up with spay/neuter and needed shots for any kitten that is not old enough at time of adoption? This vetting is included in the adoption fee and is done at PETS Low Cost Spay & Neuter Clinic.**

The $95.00 adoption fee includes: FVRP-C vaccines, FIV and FELV testing, dewormer, rabies shot, flea and ear mite treatment, spay/neuter, microchip and sales tax.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you ever surrendered a pet? If so, explain:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide two personal references:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Miss Fannie’s Use Only**

Approved: \_\_\_\_\_\_\_ Denied: \_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Adoption Fee Paid: Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check \_\_\_\_\_\_\_Cash \_\_\_\_\_\_\_PayPal \_\_\_\_\_\_\_\_Square\_\_\_\_\_\_\_

Adoption Event \_\_\_\_\_\_\_\_ adoptapet.com \_\_\_\_\_\_\_\_\_\_ Facebook\_\_\_\_\_\_\_ Instagram \_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_