



Adoption Application

Cats Rescue & Adoption Services

PO Box 2341, Plattsburgh, NY 12901

justcats2024@gmail.com 518-569-5157

For Rescue Use Only

Property Check _____

Vet Reference _____

Payment Received _____

Today's Date _____ **Cat's Name(s) *** _____

**Leave blank if you haven't chosen yet*

General Information

Your Name _____ Spouse/Partner _____

Email _____ Cell # _____ Home # _____

Street _____ City _____ State _____ Zip _____

Will you be adopting this pet for ___ Yourself ___ Companion ___ Gift to Another Person

Recipient's Name & Address _____

Residence Information

For renters, we will contact your landlord to confirm their pet policy.

Do you ___ Own home ___ Rent Apartment ___ Rent house ___ Rent Mobile Home

Other *Please explain* _____

Landlord's Name _____ Landlord's # _____ Does your landlord know you are adopting a cat? _____ Do the other people you live with know you are adopting a cat? _____

Do you have children in your home? *If yes please list how many and their ages* _____

Companion Animal History

Do you currently own other pets? *If yes please list their names and types* _____

Are they: ___ Spayed/Neutered ___ Up to date with rabies and distemper vaccines

Are your cats indoor-only? ___ Are your cats declawed? ___ Do you have plans to declaw? ___

What veterinarian do you use? _____ Phone # _____

What name is the account under at the vet? _____

Have you had pets in the past? ___ How long did you have them for? _____

Have you ever surrendered an animal? *If yes, what were the circumstances* _____

Will your new cat be indoor-only or inside/outside? _____

A new pet requires time to adjust to a new home. Are you willing to allow a minimum of 30 days for this adjustment period? ___ Yes ___ No

Employment Information

Do you work: ___ Full time ___ Part time ___ Retired ___ Homemaker ___ Student ___ Other

Employer's Name _____ Phone # _____

How long employed? _____ If student, what are your plans for this cat when school is not in session, or after transfer or graduation? _____

References

Choose people who know you well

Name _____ Phone# _____

Name _____ Phone# _____

On the back, please complete, sign and date the adoption contract.

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Adoption Contract

Please read each section carefully and initial if you understand and agree with the terms.

- ___ I certify the information I have given is true/accurate to the best of my knowledge.
- ___ As a requirement for this adoption, I understand there is a 24-48 hour waiting period for the application process to be completed.
- ___ I authorize CRAS to contact landlords, veterinarians, employers and/or references in order to investigate all statements in the application and my ability to adequately provide for a new cat.
- ___ I understand the process of adoption includes an online and/or physical property search, vet check, landlord check, phone interview in order to make an informed decision regarding the adoption of the cat/kitten stated on this application.
- ___ I acknowledge the right of a CRAS representative to conduct follow-up phone calls and/or emails in order to ensure the happiness, safety and well-being of my adopted cat. I agree to relinquish ownership of my adopted pet to CRAS if found, at any time, that I am, in any way, acting against this contract. I agree to provide CRAS with a valid email address so they may conduct a timely follow-up of my adopted pet.
- ___ If, at any time, for any reason, you are no longer able to or wish to care for your adopted companion, he/she shall be returned to **CRAS only**. You agree not to give said cat/kitten to any third party including, but not limited to, a shelter, rescue, friend, relative, neighbor, acquaintance, etc.
- ___ I understand, if, in 30 days of the date of this contract, I feel my new companion is not adjusting well to his/her new environment, I may return the animal to CRAS for a **full refund** of the adoption fee. If I choose to return my adopted companion after the 30 days for any reason, other than aggression, my adoption fee is **nonrefundable**.

About This Cat

- ___ I understand that CRAS does not always know the complete history of their rescue animals and cannot and/or will not be responsible for any illnesses or problems that occur after adoption.
- ___ I understand that the animal I am adopting has been vet checked and to the best of CRAS' knowledge is healthy. I also understand that, if my adopted companion animal has any health or medical conditions, CRAS has been forthcoming with the necessary information.
- ___ I understand that CRAS recommends that this cat NOT be allowed to run loose outside and that this cat NOT be declawed for other than medical reasons.
- ___ I understand that CRAS, its Board of Directors, officers, volunteers, members, affiliates, associates and/or family members and relatives of all mentioned will not be held legally and/or medically liable for any bodily injury incurred by you from your newly adopted pet and/or property damage during and/or after the transaction of this contract.

Your Signature _____ Date _____

This portion of the application/contract to be completed by an CRAS Representative upon reviewing.

Application Status: ___ Approved ___ Denied ___ Pending

CRAS Signature _____ Date _____