

ADOPTION APPLICATION - BARN CAT

To adopt a barn cat from *WAGGING DOG RESCUE* ...

Box 130925
 Carlsbad, CA 92013
 t 310.853.0757
 f 310.697.3111
 adoptions@waggingdog.org
 waggingdog.org

WAGGING DOG RESCUE
 a 501(c)(3) Organization
 EIN 45-5293643

1. YOU MUST LIVE IN SOUTHERN CALIFORNIA – Los Angeles, Orange, San Diego and parts of Riverside counties. Other areas of SoCal may be considered.
2. ADOPTION FEE & CONTRACT: If we approve your adoption of one of our rescued feral felines, we require a signed adoption contract. We do not require an adoption fee for our ferals but do ask for a donation to our rescue.
3. MUST BE 21: Applicant must be at least 21 years old **and head of household**.

Guardian Information

Date	Name	DL/ID # <i>*verified at Home Visit</i>	DOB <i>*required</i>
Street address (no PO Box)		City, State	Zip
Best phone - Home or Cell <i>(please circle one)</i>	Employer AND Occupation		Employer City, State
Email address		Type of dwelling: Single family home _____ Industrial space _____ Other _____	
Own or Rent?	If you have an HOA, are there pet policies?	What is the pet limit in your city/county?	How long at current residence?

Type of Barn Cats Desired

<input type="checkbox"/> I'll adopt anyone who needs a great home!			
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> One of each <input type="checkbox"/> Doesn't matter
Age:	<input type="checkbox"/> Younger	<input type="checkbox"/> Adult	<input type="checkbox"/> Senior <input type="checkbox"/> Doesn't matter
I prefer:	<input type="checkbox"/> Feral	<input type="checkbox"/> Semi-feral	<input type="checkbox"/> Doesn't matter
I'm looking for:	<input type="checkbox"/> 2 cats	<input type="checkbox"/> 3-4 cats	<input type="checkbox"/> 5-6 cats <input type="checkbox"/> 7+ cats
Any other desired/undesired qualities? (color, size, etc.) _____			

- Who lives in your home/at your property? Please note any children and their ages: _____
- Have you owned felines in the past, or currently? _____
- Is anyone in your household allergic to cats or have asthma? If YES, who? _____
- Who will be responsible for care of the barn cats? _____ financially? _____
- Are you expecting any big changes in the next 3 years (*moving, buying/selling home, getting married/having a baby, changing work schedule, etc.*)? _____
- Where do you plan to confine your barn cats for their acclimation period, and how? Please be specific: _____
- Where will their long term shelter be located on your property, and what will you provide for protection from the elements and safety from predators? _____
- Are you a frequent traveler? If YES, how will your barn cats be cared for? _____
- What provisions will you make for your barn cats if you have to move locally or out of state? _____
 _____ To a place that won't allow them? _____
- What indoor or outdoor pets or farm animals do you have at this time? _____

ADOPTION APPLICATION - BARN CAT (cont.)



- Under what circumstances would you consider giving up your barn cats? *(check all that apply)*

<input type="checkbox"/> Divorce	<input type="checkbox"/> Not what I was expecting	<input type="checkbox"/> I can't pet my barn cat
<input type="checkbox"/> Moving	<input type="checkbox"/> Cat sheds too much	<input type="checkbox"/> Cat does not get along with current pet(s)
<input type="checkbox"/> Chewing or scratching	<input type="checkbox"/> Cat doesn't hunt	<input type="checkbox"/> _____
<input type="checkbox"/> Biting	<input type="checkbox"/> Cat develops chronic illness	<input type="checkbox"/> I wouldn't give up my barn cats for any reason
<input type="checkbox"/> Garden destruction	<input type="checkbox"/> Neighbors complain about cat	
<input type="checkbox"/> Marry someone with allergies	<input type="checkbox"/> Vet bills	
<input type="checkbox"/> Planning to have/had a baby	<input type="checkbox"/> Illness in family	

- Would you ever declaw your cat(s)? Yes ___ No ___ Unsure ___ Depends on behavior ___
- Have you ever surrendered a pet to an animal shelter? If yes, please explain: _____

- Have you ever had a pet euthanized? If YES, please explain _____
- How do you anticipate your current pet(s) will react to the new cats? _____

- Have you ever applied to adopt an animal from another rescue group? If YES, please explain when you applied and the outcome _____
- Please provide the name, address and phone # of your veterinarian: _____

- Are you prepared to take responsibility, financially and otherwise, for this cat's wellbeing for the rest of his/her life, to the best of your ability for a feral/semi-feral animal? _____
- What provisions will you make for your barn cats in the event that you become unable to care for them? _____

- Are all members of the household in complete agreement with this adoption? _____
- How did you hear about Wagging Dog Rescue's Barn Cat Program? _____
- Please add any additional information you wish us to consider when we evaluate your application: _____

- Would you like to learn about becoming a Foster Parent for a rescued companion animal? _____

This application will be retained by Wagging Dog Rescue. If you are approved, this application will become part of our Adoption Agreement. We will not share your information with anyone and will only use it to make an informed decision concerning the adoption of our Wagging Dog rescued feline. Wagging Dog Rescue reserves the right to refuse service to anyone.

I understand that a home visit will be scheduled by a representative of Wagging Dog Rescue (WDR) as part of the application process and that my ID will be verified at this time. By submitting this application, I agree to such a scheduled visit. I understand that if I rent, WDR will verify permission to have this cat as a pet. I certify that all information provided by me in this application is true and correct. I have read and agree to abide by the requirements set forth. If I am approved and receive a barn cat from WDR, I will accept full responsibility, financially, emotionally and mentally, for the wellbeing of my new feline.

- I have reviewed the Barn Cat page on WDR's website and read all of the FAQs. Yes ___ No ___
- The area where I will confine my cats for their acclimation is 100% ready **with no gaps > 1 1/2"**. Yes ___ No ___
- I will provide photos or video of my confinement area so that my application can be approved. Yes ___ No ___

Adopter Signature: _____ Date: _____

Printed name: _____

Adopter Signature: _____ Date: _____

Printed name: _____