



Pre-Adoption Agreement - Cats

Name: _____ Phone (H): _____ (W): _____ (C): _____

Address: _____
Street City/Town State Zip Code

Residence: () House () Condo () Apartment *** () Tax or water bill provided to verify ownership

If you rent, are there any restrictions in your rental agreement regarding pets? () Yes () No

Landlord's Name: _____ Phone: _____ Address: _____

() Yes () No – Children living in the household? Ages: _____ () Yes () No – Senior citizens living in the household?

() Yes () No – Other pets in the household? Age? () Dog _____ () Cat _____ () Bird _____ () Other _____

() Yes () No – I do not own a pet now. I have owned a pet in the past. Type of pet: _____ What happened to pet: _____

() Yes () No – My present pets are spayed/neutered. () Yes () No – Up-to-date on vaccinations If no why not: _____

Why do you wish to adopt this pet? () Companionship () Other _____ How long will this pet be alone each day? _____

() Yes () No – Will the cat be allowed to roam free outside? () Yes () No – Are you planning on moving in the near future?

How will you handle the cat scratching the furniture? _____

What would happen to this pet if you encountered problems (personal, financial, moving, etc.) and could no longer keep it?

Name of the veterinarian you will use: _____ City: _____ Phone: _____

Employer's Name: _____ Supervisor: _____ Telephone: _____

Address: _____
Street City/Town State Zip Code

If you choose an animal that you wish to adopt, but do not take with you because either you or the animal are not ready at this time, a non-refundable 50% deposit is required. The deposit will be deducted from the adoption fee. If you change your mind or decide to adopt from another group or shelter, your deposit will be kept by Kitty Connection and applied toward animal care.

Amount of payment: \$ _____ Method of payment: () Cash () Check, check number: _____

This payment represents: () Non-refundable payment in full for adoption fee () Non-refundable deposit

() **IMPORTANT: Please read this paragraph and then initial the box.** I understand that all animals require ample time to adjust to new homes after adoption. I agree that I will not sell, give away or otherwise dispose of my adopted pet to any person, dealer, retailer, auction, institute or any other entity for any reason. If for any reason I am unable to keep my adopted pet, I agree to contact Kitty Connection. Kitty Connection has the right to reclaim this pet at no charge, and without refunding my adoption donation. I recognize that all animals can be carriers of various diseases, which can affect the health of other animals in my home, and for which Kitty Connection has no liability. I acknowledge that I am responsible for the payment of all medical costs and veterinary care that my adopted pet requires after adoption, and that Kitty Connection makes no representations or warranties, express or implied, as to the future health of my pet. I recognize that Kitty Connection also makes no representations or warranties, express or implied, about my adopted pet's temperament or the suitability of this pet to me and/or any other person, and is hereby absolved from any liability for future damages or injuries caused by this animal. This Agreement shall be governed by and construed in accordance with the laws of the Commonwealth of Massachusetts. Any suit, action or proceeding arising out of or relating to this Agreement shall only be instituted in the County of Middlesex, Commonwealth of Massachusetts.

All information contained in this questionnaire is subject to verification. It is the policy of Kitty Connection that all pet adoptions are based solely on the mutual best interest of both the pet and the prospective owner. Any intentional misrepresentation by you on this form will disqualify you from the adoption program. If Kitty Connection discovers that I have not complied with the terms of this Agreement, I recognize that it may permanently confiscate my adopted pet from my care without refund of my adoption donation.

Signature: _____ Date: _____ E-Mail Address: _____

Driver's License No.: _____ Registration No. _____ Date of birth: _____