

ADOPTION APPLICATION

		DATE:
NAME		
ADDRESS		
CITY	STATE	ZIP
HOME NUMBER	CELL NUMBER	
EMAIL ADDRESS		

• WHY DO YOU WANT A RAGAMUFFIN?

- DO YOU HAVE A PREFERENCE REGARDING SEX OR COLOR? IF SO, PLEASE EXPLAIN
- WHAT OTHER PETS DO YOU HAVE NOW? PLEASE STATE TYPE (DOG, CAT, ETC.) AND AGE OF EACH ANIMAL.
- ARE YOUR PETS SPAYED OR NEUTERED?
- HOW MANY CHILDREN ARE IN YOUR HOUSEHOLD AND WHAT ARE THEIR AGES?
- HOW MANY TOTAL PEOPLE ARE IN YOUR HOUSEHOLD?

- IS ANYONE IN YOUR HOUSEHOLD ALLERGIC TO CATS?
- DESCRIBE THE AREA WHERE YOU LIVE. (CITY, SUBURBAN, RURAL)
- DO YOU RENT OR OWN YOUR HOME?
- IF YOU RENT, DO YOU HAVE PERMISSION FROM YOUR LANDLORD TO KEEP PETS?
- WHERE WILL THE CAT/ KITTEN STAY WHILE YOU ARE OUT OF TOWN?
- UNDER WHAT CIRCUMSTANCES WOULD YOU FIND IT NECESSARY TO REHOME YOUR RAGAMUFFIN?

MOVING____MARRIAGE____NEW BABY____DIVORCE___ILLNESS____BEHAVIORAL____

OTHER (PLEASE EXPLAIN)

- DO YOU PLAN TO ALLOW THE CAT/KITTEN TO HAVE ACCESS TO THE OUTDOORS? IF SO, PLEASE EXPLAIN.
- WHAT ARE YOUR THOUGHTS ON DECLAWING?
- PLEASE SUPPLY THE NAME, ADDRESS, AND TELEPHONE NUMBER OF YOUR VETERINARIAN