



Thank you for visiting **Willamette Humane Society**.
 We are a private, nonprofit organization that relies on support from the public
 to provide valuable services to the animals in our community.

Anyone who wishes to visit with our animals must complete the entire application.
 You must be 18 years of age to adopt an animal from our shelter.

503-585-5900 • Adoptions ext. 327 • 503-585-7906 fax • adoptions@whs4pets.org

Name: _____

CAT ADOPTION APPLICATION							
Name						Today's Date	
Physical Address					City	State	Zip
Home Phone			Work or Cell Phone		Date of Birth		
Have you adopted from WHS? <input type="checkbox"/> Yes <input type="checkbox"/> No		Email address				<input type="checkbox"/> Please sign me up for WHS's e-newsletter	
Do you? <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Live w/ Parents				Type of residence <input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Farm <input type="checkbox"/> Other:			
Number of people in the household:				Ages of those under 18:			
Please list all pets you currently own or have owned in the last 5 years:							
Type of animal:	Gender:	Spayed/Neutered?	Age:	Live indoors (I), outdoors (O), or both (B)?	Still own?	If not, why?	Is/was your pet current on vaccinations?
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> I <input type="checkbox"/> O <input type="checkbox"/> B	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you currently have a veterinarian? <input type="checkbox"/> Yes <input type="checkbox"/> No				Who is your veterinarian?			
I have owned a cat before: <input type="checkbox"/> Yes <input type="checkbox"/> No			My household is: <input type="checkbox"/> Calm/quiet <input type="checkbox"/> Average <input type="checkbox"/> Active/noisy				
My cat will be: <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Indoor & Outdoor					Where will the litter box be placed?		
My cat needs to get along with: <input type="checkbox"/> Children under 8 years old <input type="checkbox"/> Children over 8 years old <input type="checkbox"/> Elderly people <input type="checkbox"/> Dogs <input type="checkbox"/> Cats <input type="checkbox"/> Other animals:							
What made you decide to adopt a cat?				Do you plan on declawing the cat(s) you adopt? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure			
Please check the topics you would like to discuss today: <input type="checkbox"/> Indoor vs. Outdoor <input type="checkbox"/> Litter box training <input type="checkbox"/> Cats with children <input type="checkbox"/> Scratching furniture <input type="checkbox"/> Declawing <input type="checkbox"/> Appropriate toys <input type="checkbox"/> Vaccines <input type="checkbox"/> Flea control <input type="checkbox"/> Introducing a new cat to other pets <input type="checkbox"/> Other:							

Date: _____

I certify the information I have provided is true and understand that any false information will nullify the adoption. I agree to a pre-/post-adoption home inspection by an employee of the Willamette Humane Society if requested. I understand WHS reserves the right to refuse any adoption. I understand that I may place a hold on an animal for 1 business day for a non-refundable, non-transferable \$10 fee.

Signed: _____ Date: _____

