



9716 Moore Road
Lakeland, FL 33809
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savingpawsrescueoffloridainc@gmail.com

Cat/Kitten Adoption Application

Name of 1st Cat I'd Like to Adopt: _____ Date: _____

Name of 2nd Cat I'd Like to Adopt: _____

New Name(s) (If changing): _____

Agreement

NOTE: Applicants are to be at least 21 years of age. If under 21, a parent or adult is required to adopt the pet and the adopted pet is to live with the parent/adult applicant.

Thank you for your interest in adopting a rescue animal from Saving Paws Rescue of Florida, Inc. Please initial next to each below your understanding and agreement.

_____ I hereby agree that the above animal is being adopted by me solely as a pet for myself and/or immediate family. I agree to not giveaway, sell, or dispose of adopted animal to another individual, dealer or to surrender to another rescue or shelter. ***If I am unable to keep this pet, I agree to contact Saving Paws Rescue of Florida to surrender the pet.***

_____ **All cats and kittens adopted from our rescue are to be kept indoors ONLY!** We consider a screened porch or pool lanai to be an indoor area.

_____ **Declawing is strictly PROHIBITED!** I hereby agree that this cat shall not be declawed.

_____ Applicants cannot have had any conviction involving neglect and/or abuse of an animal.

_____ Have consent from landlord or HOA if required, to have a cat.

_____ All dogs and cats in the home are up to date on annual vaccinations and spayed and neutered at time of adoption.

_____ It is our policy to follow-up with new owners within a week to see how the adoption is going and if there are any problems or concerns. We generally text the adopter requesting a brief update and a couple photos so we can see how the adopted pet is doing in his/her new home.

_____ Saving Paws Rescue will set up a home check if we feel the need exists prior to adoption to ensure use that you will be providing a safe and healthy home for the adopted pet.

****NOTE:** Filling out this application does not guarantee that you will be approved or chosen to be the adopter of the animal you selected. We place cats based on criteria which is in the best interest of the pet.

All cats adopted from Saving Paws Rescue of Florida will be spayed and neutered prior to the finalized adoption process. All adoption fees include alteration, one-year rabies vaccination, deworming, microchip, FeLV/FIV test, and age-appropriate vaccinations.

For Administrative Use Only
Animal Information

1st Cat's Name: _____ DOB/Age: _____

☐ Female ☐ Male Breed / Description: _____

Microchip: _____ Company: 24 PetWatch

2nd Cat's Name: _____ DOB/Age: _____

☐ Female ☐ Male Breed / Description: _____

Microchip: _____ Company: 24 PetWatch

Adopter's Information

Name: _____ Birthdate: _____

Spouse/Partner's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Alt Phone: _____

Email address: _____

How long have you lived at this address? _____ If less than two years, provide previous address.

Address: _____

City: _____ State: _____ Zip Code: _____

Questionnaire

Please list two persons we may contact should we not be able to reach adopter in an emergency:

Contact #1:

Name: _____

Relationship: _____ Phone: _____

Contact #2:

Name: _____

Relationship: _____ Phone: _____

How many people (not including yourself) live in your home? Adults: _____ (18+) Children: _____

Please list the names of all persons 18 years of age and older in the home:

Does anyone in the household have pet allergies? ☐ Yes ☐ No

If yes, please explain: _____

What type of dwelling do you live in?

☐ House

☐ Condo

☐ Apartment

☐ Mobile home

Do you own or rent? ☐ Own ☐ Rent

If you own your home, does your HOA allow pets? ☐ Yes ☐ No

If you rent, does your landlord allow pets? ☐ Yes ☐ No

If yes, have you checked if there is a pet fee? ☐ Yes ☐ No

Do you have any other pets? ☐ Yes ☐ No

If yes, please list all pets, their breeds, species, and ages below:

If you have cats and dogs, are they spayed/neutered and up to date on vaccines? ☐ Yes ☐ No

CARE AGREEMENT

Please initial each section of the Adoption Care Agreement acknowledging that you agree to the following terms and conditions regarding the care and treatment of the pet you are adopting from our rescue:

- _____ The Adopter agrees to pay Saving Paws Rescue of Florida, Inc. (SPRF) an adoption fee of:
\$ _____
- _____ The Adopter understands that the adoption fee is immediately spent on saving another pet's life and, therefore, if the cat is returned for any reason, the adoption fee is non-refundable after 14 days.
- _____ The Adopter agrees to have the cat examined by a licensed veterinarian at least once each year and will receive adequate vaccinations and treatments to ensure good health.
- _____ The Adopter will provide the cat with a safe home, proper care, attention, which includes a healthy diet, fresh water, and shelter.
- _____ Declawing is strictly prohibited. The Adopter agrees to **NEVER declaw the cat under any circumstances** and understands that declawing can cause serious physical, psychological, and behavioral complications. The adopter understands that scratching is a normal behavior and will provide scratching posts, pads and keep cat's nails trimmed.
- _____ In the event Saving Paws Rescue of Florida discovers inhumane treatment of the adopted animal or breach of this contract, it is agreed that SPRF has the right to immediately take possession of the cat. It is understood by the Adopter that a representative of the Saving Paws Rescue of Florida, Inc. may conduct a home visit to verify the welfare of the adopted animal if there is suspected abuse or neglect.
- _____ The Adopter agrees to keep the Saving Paws Rescue of Florida, Inc. informed of any address or phone number changes.
- _____ The Adopter agrees to notify the Saving Paws Rescue of Florida, Inc. of any incident involving Animal Control and/or complaints arising from ownership of adopted cat and/or If the adopted animal becomes lost or stolen.
- _____ Saving Paws Rescue of Florida, Inc. makes no warranties or guarantees regarding the animal's health, medical status, or temperament. The Adopter understands that the cat may have been rescued from an animal shelter or lived as a stray and possibly exposed to communicable disease(s). For this reason, the Adopter understands that it is critical to have the animal examined promptly by a veterinarian prior to exposure to other pets.

TERMS OF THE AGREEMENT

All the above information is true and complete. I agree to follow all the rules and procedures of Saving Paws Rescue of Florida (SPRF). I will not hold SPRF responsible for any damage, injury, or harm caused directly or indirectly to any person or property by any adopted animal. I, the undersigned, have read the above requirements and conditions and understand them fully.

APPLICANT:

Signature

Date

SAVING PAWS RESCUE REPRESENTATIVE:

Signature

Date

FOR OFFICE USE ONLY:

- ☐ Application Accepted
- ☐ Application Denied
- ☐ Saved to Google Docs
- ☐ Entered into Shelter Manager
- ☐ Microchip Transferred
- Adoption Location
- ☐ PS ☐ Shelter ☐ AAP ☐ RM
- ☐ PF Other _____
- Payment Received
- ☐ PP ☐ Cash ☐ Check ☐ Credit
- ☐ Venmo ☐ Cash App ☐ Zelle
- ☐ Other _____
- Amount Paid _____
- ☐ Entered in PS iPad