

Lycoming Animal Protection Society Inc.
3510 West Fourth Street
Williamsport , Pa. 17701
(717) 327-8707

Date: _____

CAT/KITTEN ADOPTION FORM

Your Name _____ Cat's Name _____

Address _____

City _____ State _____ Zip _____

Daytime Telephone (_____) _____ Evening Telephone (_____) _____

1) Do you: _____ own a home? _____ rent? If you rent, does your lease allow pets? _____ Yes _____ No

Landlord's Name _____ Telephone No. (_____) _____

2) Do you have any children ? _____ Yes _____ No If yes, what are their ages? _____

3) Please list your current employer : _____

4) Do you have any pets now? _____ Yes _____ No If yes, are they spayed or neutered? _____ Yes _____ No

Please list what type(s) of animal (s) and how many: _____

5) Have you had any pets in the past? _____ Yes _____ No What type(s) of pets? _____

If yes were they spayed or neutered? _____ Yes _____ No

6) Why do you want to adopt a kitten/cat _____ For breeding. _____ For catching mice. _____ For companionship

_____ Other: (explain): _____

7) Where do you keep the kitten/cat? _____ In the house. _____ In the basement. _____ Outside. _____ In the barn.

_____ Other (explain): _____

8) If you adopt a kitten would you take it to be spayed (females) or neutered (males) when it is of age?

_____ Yes _____ No (Note: females are ready to be spayed at 6 months of age . Males are ready to be neutered between 6 to 8 months of age.)

9) What would you do with the cat if you had to move? _____

(TURN OVER)