CAT ADOPTION APPLICATION

ST. THOMAS
THE RAILWAY CITY

City Animal SERVICES

ID#: _____ Cat's Name: _____ Breed: _____ Age: _____ Gender: _____

Section 1 – General Applicant Information			
Applicant Name:			
Mailing Address: (STREET, CITY, POSTAL CODE)			
Telephone:		E-mail Address:	

Please complete the following as a condition for your adoption application. Our main objective is to ensure good compatibility between you, your family, and your new pet. Please keep in mind that the animal's long-term welfare is our foremost consideration.
Please return this application to the shelter staff when completed.

Section 2 – Background Information & Questionnaire						
This cat is for:	Myself ☐	Immediate Family ☐	Friend ☐	Someone Else ☐		
Reason for Adopting: (check all that apply)	Family Pet ☐	Companion ☐	Breeding ☐	Playmate for Child ☐		
	Barn Cat ☐	Emotional Support Cat ☐	Pest Control ☐	Other ☐		
I live in a:	Apartment ☐	Detached House ☐	Townhouse ☐	Trailer ☐	Other ☐	My Home is: Owned ☐ Rented ☐
If renting, does your landlord allow pets?	Yes ☐ No ☐	Landlord Name & Telephone: _____				
Does anyone at home have an animal allergy?	Yes ☐ No ☐	Unsure ☐	_____			
Do you have children living in your home?	Yes ☐ No ☐	If 'Yes', list ages of children: _____				
If 'Yes', how will they adjust to a new cat?	_____					
Have you ever owned a cat before?	Yes ☐ No ☐	If yes, do they still live with you?	Yes ☐ No ☐			
Do you have any other pets? (Please list):	_____					
Are your other pets up-to-date on vaccines?	Yes ☐ No ☐	Are your current pets spayed/neutered?	Yes ☐ No ☐			
Are your other pets cat-friendly?	Yes ☐ No ☐	Unsure ☐	Do you plan to have this cat de-clawed?	Yes ☐ No ☐		
On average, how many hours a day will the cat be left alone?	_____					
Where will the cat spend time when you are not home?	_____					
Do you plan on providing your cat with a place to scratch?	_____					
Will this be an indoor cat or an outdoor cat?	_____					
Do you plan on providing your cat with any toys?	_____					
What food do you plan on feeding your cat?	_____					

Section 3 – Veterinary Services & Previous Pet History	
Are you a registered client of a licenced veterinarian? If 'Yes' – please provide contact information:	Name of Clinic: _____ Address: _____ Phone Number: _____
NOTE: The City of St. Thomas Animal Services may contact your veterinarian for a reference. Please inform your veterinarian of your intentions to adopt.	
If 'No' (you do not have a veterinarian) – please provide a personal reference we can contact:	Name: _____ Relationship: _____ Phone Number: _____
Have you ever had to re-home a pet before? If 'Yes' – please explain why:	_____ _____ _____ _____
Do you consent to being registered with Royal Canin as an adopter to receive a **FREE** adoption kit and coupons? We will only disclose your name, phone number, and e-mail to Royal Canin:	Yes ☐ No ☐

Section 4 – Considerations & Legal	
Please initial all of the boxes beside each statement below to ensure you have read, fully understand, agree, and accept all responsibility for the dog you are applying to adopt from City Animal Services:	
I am aware that a registered veterinarian has examined this animal, that it has been vaccinated, treated with a parasite preventative medication (that treats fleas, ear mites, roundworms, heartworms, and hookworms), has been microchipped, and has been sterilized. I am aware that this animal has been vaccinated against rabies and that this vaccine is only good for one year, unless otherwise advised.	☐
I have been informed that all animals may potentially carry and transmit diseases, some of which can affect people, including bacteria, viruses, parasites, and fungal diseases (i.e. ringworm) and that these diseases may be undetectable in what appears to be a healthy animal at the time of adoption.	☐
I am aware that pets may exhibit typical but potentially undesirable behaviours, including but not limited to: aggression, house soiling, biting, scratching (people, furniture, and woodwork), digging, and/or urine spraying, and that these normal behaviour patterns may be difficult to manage. No one at City Animal Services has advised me that this pet will **not** engage in any of these behaviour patterns.	☐
I understand that due to high veterinary costs, City Animal Services does not perform bloodwork, urine or fecal testing on their animals, and that these tests are only completed if symptoms are present that warrant further investigation.	☐
I understand that any animal deemed good with children means that to the knowledge of City Animal Services, the animal has not shown aggressive behaviour and is likely to be compatible with children. I agree that this is not a guarantee of a child's safety with this animal and that an adult should always supervise interactions between animals and children.	☐

I accept the animal as it is at the time of adoption and understand that the City of St. Thomas and City Animal Services is not responsible for any medical or behavioural conditions not readily detected or detectable prior to or at the time of this adoption or discovered after such adoption. At no time does the City of St. Thomas or City Animal Services accept responsibility for expenses incurred following adoption for veterinary care or the services of an animal behaviourist. This includes veterinary expenses for animals currently residing in the home and animals owned by others.	☐
I acknowledge that this adoption is final, and legal ownership will be transferred to me. The City of St. Thomas and City Animal Services does not provide an adoption trial window. I understand that I will NOT receive a refund for the return of said animal. I acknowledge that I have read and understand this agreement and hereby on behalf of me and my family, our heirs, personal representatives and executors, we hereby release, discharge, indemnify and hold harmless the City of St. Thomas and City Animal Services including its officers, directors, agents and employees from any and all claims, causes of action, or demands of any nature with our services for the City of St. Thomas and City Animal Services, including but not limited to accidents, illness, injuries, or damage to my home/vehicle/pets or persons as a result of my adoption of this animal.	☐

Other Comments:	_____ _____ _____ _____

I hereby certify that all of the information I have provided above is true and accurate. I understand that any falsification or omission of any of the above information could result in an automatic application denial. By signing below, I agree that I shall not hold the City of St. Thomas responsible in any way for any expenses I may incur as a result of my adoption from this point forward, and that I accept the adoption as final.

Applicant Signature: _____ _____
MM/DD/YYYY

City of St. Thomas Approval: _____ _____
Staff Initials MM/DD/YYYY

_____ _____
Staff Initials MM/DD/YYYY

The City of St. Thomas Animal Services reserves the right to refuse any applicant.
The application process can take time to process; we thank you for your patience.
Applications for animals are not based on first received.

Animal Services: 100 Burwell Road, St. Thomas, ON N5P 3R8 Phone: (519) 631-7430 animalservices@stthomas.ca

Personal information is collected by authority of the Municipal Act as amended and enables city staff to process your request.
Please contact Matt Vriens at 100 Burwell Rd., St. Thomas, ON, N5P 3R8, Telephone 519.631.1680 ext. 5130 for questions.