

Making a Difference
Four Paws at a Time



P.A.W.S.
of Michigan

Cat Adoption Application

P.A.W.S. of Michigan

(Precious Animal Welfare Society of Michigan)

P. O. Box 2184

Riverview, Michigan 48193

info@pawsofmichigan.com ~~~~ pawsofmichigan.com



Date: _____

I am interested in adopting:

Cat Kitten Animal's Name: _____ Second Choice: _____

Age of Applicant: _____ Age of Co-Applicant: _____ Do you live with your parents: Yes No

Name: _____ E-mail Address: _____

Address: _____ City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Living Situation:

Do you live in a: House Apartment Condo Mobile Home

If renting, please provide landlord's name and phone number or apartment complex name and phone number:

How long have you lived at present address: _____

How many adults reside in your home: _____ No. of children? _____ Ages of each _____

Are all household members in agreement with adopting this cat? _____

Do any members of the household have allergies: Yes No If yes, describe: _____

Who will be primary caretaker of cat: _____

What is your reason for wanting to adopt this cat: (Please check all that apply)

Companion for You Child's Pet Companion to Another Pet Gift/Surprise

Other (explain) _____

Are you looking for an: Inside only cat Outside cat Inside/outside cat

Who will be responsible for caring for the cat during your absence: _____

Do you plan to declaw this cat? Yes No

Who is your current/previous veterinarian? (Clinic name and phone number)

Vet name/clinic name: _____ Phone number: _____

2nd Vet name/clinic name: _____ Phone number: _____

How often do you take your pet(s) to the vet? _____ Date of last visit? _____

Do you presently have any other pets? Yes No *If "yes" - complete following section:*

Pet's Breed	Pet's Age	Pet's Sex	Spayed/Neutered	Vaccines Current	Heartworm Prevention	Pet's Name
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	

How much time do your current/previous pets spend outdoors? _____

How much time and in what condition (cage/leashed/roam) will this new cat spend outdoors? _____

How many hours a day would this cat be left alone? _____

Where will the cat be kept when left alone? _____

What other pets have you had in the last ten years? _____

How long did you have them? _____ Where are they now? _____

Have you ever had to return a pet to a breeder or taken it to a pound, shelter or rescue? Yes No

What reasons would you consider giving up a pet? Check all that apply:

- Birth of a child New roommate Marriage Divorce Unemployment Allergies
 Needs regular medication Other (explain) _____

What behaviors would you be unable to tolerate from an adopted cat? (Check all that apply)

- Scratching furniture Meowing/howling Hiding from guests/other family members
 Jumping onto furniture Fighting Shedding hair on furniture or clothing
 Jumping onto countertops Escaping Climbing curtains, drapes or blinds
 Throwing up/hairballs Playing in early a.m. hours Getting into cabinets/closets/cupboards

Methods I plan to use to discourage unwanted behavior(s): (Check all that apply)

- Yell Put cat outside Spritz with water
 Put cat in another room Won't tolerate behavior Throw something at the cat
 Remove problem item(s) Swat/spank/hit with hand newspaper Who cares, cats are cats!

What arrangements have you made to care for the cat in the event you can no longer do so or you have to move?

Rescue animals require time to adjust to their new home. What amount of time do you consider to be reasonable for this adjustment? _____

The average cost per year for providing preventative veterinary care is about \$300-\$500. Additionally, there are expenses for food, toys, grooming, boarding, emergency vet care, etc. to consider. Does your household budget allow you to comfortably cover these expenses?

Yes No

Would you object to a P.A.W.S. representative visiting or calling to inquire about the cat? Yes No

The foregoing information which I have provided to P.A.W.S. for the purpose of adopting a cat is accurate and complete.

By signing this application, I agree to, and understand the following:



Submitting an application does not obligate you, nor does it guarantee that the cat will be adopted to you.



P.A.W.S. does not work on a first-come, first-serve basis. We collect applications for the cat in question and make a determination on where we think the cat will fit in the best.



While P.A.W.S. makes every effort to process new applications as soon as possible, it may take up to five days or more to fully process your application. The volunteers at P.A.W.S. all work at other outside jobs. Their volunteering with P.A.W.S. is done in their spare time, lunch hours, evenings, weekends, etc. We cannot always reply ASAP to each application which has been placed.



The P.A.W.S. of Michigan Board makes all adoption decisions, and these decisions are final.

I understand that completion of this application will, in no way, guarantee the adoption of this cat, and I understand that electronic signatures are valid when the application is returned electronically.

The above information, which I have provided to P.A.W.S. for the purpose of adopting this cat is accurate and complete.

Signed: _____

Date: _____