



Adoption Information Form

Habitat 4 Paws
P. O. Box 5662 Frisco, TX
75035
Info@habitat4paws.org

www.habitat4paws.org
www.facebook.com/h4paws
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Name _____ Name of Pet: _____

Street Address _____

City _____ Zip _____ Date of Birth _____

Phone (h) _____ (w) _____ (c) _____

Email Address _____

Emergency Contact & Phone: _____

ABOUT YOU AND YOUR HOME:

Do you live in _____ House _____ Apartment _____ Other _____ Own or lease? _____

If leasing, proof of pet deposit required. Landlord's contact no.: _____

What is the limit of pets allowed by your city code or homeowner association? _____

Are there children in your household? Yes _____ No _____ Ages: _____

Are you a college student? _____ Do you have roommates? _____

Is anyone in your home allergic to cats: If so, please explain: _____

Is everyone in your home in agreement for a pet? _____

Who will be the primary caretaker of your pet? _____

If you travel, what arrangements will be made for your pets? _____

If you move or relocate, what are your plans for your pet(s)? _____

What behaviors you are willing to work with, if any?

_____ Clawing, scratching furniture
_____ Getting on Furniture

_____ Litter Box Training
_____ Socializing

How much time will you spend daily with your pet? _____

Where will it spend most of its time? Indoors____ Outdoors____ Where will it sleep? _____

If any behavioral issues develop (such as scratching furniture, litter box issues, or socialization) are you willing to call us for help and work with the pet? _____

Where will you keep a litterbox? _____

Are your current cats declawed? _____ Do you plan to declaw your new cat? _____

Have you ever surrendered/rehomed a pet to a shelter, rescue or friend/family member? _____

If so, to whom, when and why? _____

ABOUT YOUR PETS:

What other pets live in your home (please list breed, age): _____

Are they spayed/neutered? _____ Are cats allowed outside? _____

Are they current on vaccinations, heartworm and flea preventative? _____

Are they friendly with other pets? _____

Please list your vet's contact information _____

What heartworm/flea preventative do you use? _____

Adopter Signature

Printed Name

Approved by: _____ Date: _____

Thank you for your application to adopt! You may return a .pdf of your application to info@habitat4paws.org or mail it to P. O. Box 5662, Frisco, Texas 75035 and we will follow up with you as quickly as possible.