

DoggieRescue.com

ABN 098 918 471, ABN 49 098 918 471
2 McCowan Rd (Cnr Bloodwood Rd), Ingleside, 2101
Rehoming Organisation No. R251000024
Phone: 02 9486 3133 Mob: 0429 044 484
Email: cats@doggierescue.com Open: 10am-5pm Tues to Sun



Cat Adoption/Foster Questionnaire

Many of the Doggie Rescue kittens and cats haven't had the happiest starts in life and our policy is to ensure that our cats go to homes where they will be loved and properly cared for. For this reason we make sure that each person who adopts one of our cats is capable of, and willing to, accept the responsibilities of pet ownership. Our cats are INDOOR CATS only, are de-sexed and kitty-litter trained. If you are prepared to make a lifelong commitment to one of our cats and keep them inside or in a purpose built cat enclosure or with access to a cat run, please complete this questionnaire so that we can match you with a cat that best suits your needs, experience and lifestyle. In some cases, more than one application is received for the adoption of a particular cat and sometimes the cat you apply for is adopted out to someone else before your appointment time. DR can suggest another suitable cat to adopt. Please note you must be over 18 to adopt a cat and fill in this questionnaire. Our website is updated daily www.doggierescue.com. **Adoptions by appointment only.** Thank you!

This is an interactive PDF - type in the spaces, click the boxes and then SAVE AS

I am interested in: Adopting a cat Fostering a cat

Cat(s) I am interested in:

About you and your family

Name: _____ Age: 18-30 30-60 60-75 75+
Residential address: _____
Home phone: _____ Work phone: _____
Mobile phone: _____ Email: _____
Names of all persons living in your household, ages and their relationship to you : _____

Does any member of your family have animal-related allergies? Yes No
Are you planning a trip or holiday in the short-term? Yes No Do you travel a lot? Yes No
Are you a permanent resident? Yes No
Photo ID: Driver's licence no./other photo ID Expiry Date: _____
 ID sighted and verified

Your home

Type of residence: House Apartment Townhouse House with acreage
Is your home fitted with door and window screens? Yes No
Do you Own or Rent? If you rent, or if you live in an apartment/town house, do you have written landlord and/or Body Corporate approval to keep a cat? Yes No If YES, please forward written approval with this application, otherwise please wait to submit this application until you have your written approval.
Is everyone in your household in agreement about adopting/fostering a cat? Yes No

Your pets/companion animals

Do you currently have a cat/s? Yes No Number of Cats, ages and sex: _____
Have you ever had a rescue/shelter cat? Yes No Details: _____
Do you have any other pets? Dog(s), Rabbit(s), Chickens, Other
Breed of Dog/s and ages: _____
Name of your veterinarian/vet clinic: _____ Phone: _____

Your new cat	
Please indicate your preferences (you may select more than one option in each category):	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Either
Age:	<input type="checkbox"/> Kitten (under 12 weeks) <input type="checkbox"/> Juvenile (3- 6 months) <input type="checkbox"/> Young adult (7-18 months) <input type="checkbox"/> Adult <input type="checkbox"/> Mature (5+ years)
Activity level:	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> Fairly Active <input type="checkbox"/> Energetic
Coat:	<input type="checkbox"/> Short (e.g. Burmese) <input type="checkbox"/> Medium <input type="checkbox"/> Long (e.g. Persian)
Breed (s) you like:	
<p>Is it essential that your cat is good with children? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Where will your cat sleep?</p> <p>Do you have any specific questions about DR cats? If so, please provide details:</p> <p>What do you think you will most enjoy doing with your cat on a daily basis?</p> <p>Please provide some information about why you are interested in adopting a cat and why you think the cat/s nominated would be right for you:</p> <p>What are the characteristics you would most look for in a cat?</p> <p>What are the characteristics you would least like in a cat?</p> <p>How many hours will your cat be alone each week? <input type="checkbox"/> None <input type="checkbox"/> 10-20hrs <input type="checkbox"/> 20-30hrs <input type="checkbox"/> 30-50hrs</p> <p>Where will your cat be left when he/she is alone?</p> <p>When you are home, where will your cat be?</p> <p>Your cat may live for more than 15 years, what would you do if you could no longer care for your cat?</p> <p>If applicable, describe any cat-safe Outdoor Area/s that you have? (e.g. enclosed balcony)</p>	

Do you have any concerns about owning a cat? Yes No

If yes, what are they?

Is there anything else you would like to tell us about yourself?

All of the information I have provided is true and correct. If any information changes,
I will advise Doggie Rescue promptly.

Name

Date

Signature