

cat adopter survey



first name	last name	date
address		apt. #
city	state	zip
home phone ()	cell phone ()	email

1	I would consider my household to be like	A library	Middle of the road	A carnival	
2	I am comfortable with a cat that likes to play "chase my ankles" and similar games	No	Somewhat	Yes	
3	I want my cat to interact with guests that come to my house	Little of the time	Some of the time	All of the time	
4	How do you feel about a boisterous cat that gets into everything?	Love them but rather not to live with them	Depends on the situation	Fine by me	
5	My cat needs to be able to adjust to new situations quickly	Not important	Somewhat	Yes	
6	I want my cat to love being with children in my home	It's not important whether my cat loves being with children	Some of the time	Most of the time	Children do not often come to my house
7	My cat needs to be able to be alone	More than 9 hours per day	4 to 8 hours per day	Less than 4 hours per day	
8	When I am at home, I want my cat to be by my side or in my lap	Little of the time	Some of the time	All of the time	
9	I want my cat to enjoy being held	Little of the time	Some of the time	Most of the time	
10	I need my cat to get along with (circle all that apply)				Dogs Cats Birds Other
11	My cat will be	Inside	Inside and Outside	Outside	
12	I have lived with cats before	No		Yes Date _____	Currently
13	I prefer my cat to be talkative	No		Yes	It's not important if my cat is talkative
14	I want my cat to play with toys	Little of the time	Sometimes	Often	
15	I want my cat to be active	Not very active at all	Somewhat	Yes, very	
16	It is most important to me that my cat _____ <small>(fill in the blank)</small>				
FOR OFFICE USE ONLY		RECOMMENDED COLOR MATCH: PURPLE ORANGE GREEN RECOMMENDED FELINE-ALITY™ (IES) _____			

Permission for Adoption Follow-up? *Yes No*

Who will primarily be responsible for the care of the pet? _____

Emergency Contact (Microchip): Name _____ Phone number _____

_____ Yes, I consent to the release of my name and telephone number to anyone that finds my pet.

_____ No, I prefer that communication only be through 24PetWatch.

Are you over 18 years of age? *Yes No* Are you over 60 years? *Yes No*

Are you a member of any branch of the U.S. military (active, reserve, or veteran)? *Yes No*

In which type of home do you live? *House Mobile Home Apartment Duplex Condo Other*

Pet History: List pets **currently owned**, including small caged pets.

Animal Type (dog, cat, other)	Name	Breed	Age	Sex M/F	Spayed or Neutered? (Y or N)	Kept Indoors? Or Outdoors?	How long owned?	Own now? Or Why Gone?

Name of Current Veterinarian or Clinic _____ Phone Number _____

Under whose name and what address are records kept? _____

Please circle topics you would like to discuss today.

- Litter box issues Indoors vs Outdoors Declawing
- Biting Introducing to other pets Training
- Vaccines Preventative Care Animal laws
- Cats and Children Escaping Other

Certifications, Authorizations, Releases, and Understandings

- I certify that all statements on this Adoption Application are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being allowed to adopt from The Humane Society of West Michigan.
- I authorize the Humane Society of West Michigan to contact my reference(s), my veterinarian(s) and anyone else The Humane Society of West Michigan deems necessary to confirm how I have cared for my companion animals and/or how I am likely to care for any companion animal(s) I adopt from The Humane Society of West Michigan.
- I authorize my veterinarian(s) to release to The Humane Society of West Michigan all veterinary records of the animals I own or have owned.
- I understand that, with proper care, cats can live 15 years or more and I am prepared to commit myself to the long-term care and protection of any animal I adopt from the Humane Society of West Michigan.
- I understand that animal(s) I adopt from The Humane Society of West Michigan may require veterinary medical or health treatment beyond that provided by The Humane Society of West Michigan prior to my taking the animal(s) home. Such additional veterinary medical treatment could be costly. I acknowledge that The Humane Society of West Michigan is not responsible for providing any additional veterinary treatment or the incurring cost of any additional veterinary treatment provided by veterinarians I select to provide such treatment.
- I will not sell or give away animal(s) I adopt from The Humane Society West Michigan. As long as I live in the service area of The Humane Society of West Michigan, I agree to return the animal (s) to The Humane Society of West Michigan in the event I cannot keep or choose not to keep the animal(s). If I move from the area, I agree to take the animal(s) to the local humane society or comparable local animal welfare organization. You may return the animal to HSWM within 21 days of adoption at no charge. During that time, you may exchange for another animal. After 21 days, you will be assessed a transfer of care fee of \$20 and will not be offered an exchange.

7. I understand that the handling of animals that I may meet may place me in a hazardous situation and could result in injury to me or my personal property. On behalf of myself, my heirs personal representatives and assigns, I hereby release, discharge, indemnify and hold harmless the Humane Society of West Michigan and its directors, employees and agents from any and all claims, causes of action and demands of any nature, whether known or unknown, arising out of or in connection with my meeting an animal for the purpose of adoption.

Date

Applicant's Signature

COMMON HEALTH PROBLEMS TO WATCH FOR IN CATS

FELINE LEUKEMIA

Feline leukemia virus, a retrovirus, is a common infection of cats. It is the cause of more cat deaths directly or indirectly, than any other organism and is widespread in the cat population.

Feline leukemia virus infection (FeLV) can be transmitted in several ways:

1. By the saliva of infected cats contaminating the eye, mouth, and nose membranes of non-infected cats via licking.
2. By passing infected blood to non-infected cats during mating or fighting.
3. From mother to fetuses (developing kittens) during pregnancy.

There is no effective treatment for FeLV. 85% of cats with FeLV infection will die within 3 years of diagnosis. A strictly indoor lifestyle will minimize your cat's exposure to the disease. To assure as much as possible that we do not place a FeLV positive cat, every cat is tested for this virus before adoption.

Upper Respiratory Viruses

Sneezing, coughing, nasal congestion, inflamed/watery eyes, loss of appetite, lethargy, and sometimes mouth ulcers are all symptoms of an upper respiratory infection. There are many viruses that can cause these symptoms and sometimes a cat can be infected with more than one virus at a time. All of them are very contagious. Did you know that a cat's sneeze can travel up to four feet?

Since these symptoms are caused by viruses, antibiotics are only used when a secondary bacterial infection is suspected. A properly vaccinated cat is protected against some of these viruses. In severe cases, hospitalization with IV fluids can be required.

Feline Distemper (Panleukopenia)

Feline distemper is a very contagious virus that causes fever, vomiting, bloody diarrhea, and commonly results in death. The virus can be transported from cat to cat by toys, bedding, and even our clothing or hands. Proper vaccination and an indoor lifestyle are a cat's best defense against this virus.

Ear Mites

Ear mites are a common parasite of cats (much less common in dogs) that cause intense itching and large amounts of brown/black debris in the ears. Sometimes the mites can be visible to the naked eye but most of the time are found during a microscopic exam of the debris from the ears. Mites are passed from cat to cat through direct contact. There are many ways to treat ear mites but the most effective medications will be available through a veterinarian.

THERE ARE RISKS INVOLVED IN ADOPTING A CAT FROM A SHELTER

THE CAT YOU MAY WANT TO ADOPT HAS BEEN EXPOSED TO VIRUSES, PERHAPS BEFORE HE WAS BROUGHT HERE, BUT MOST CERTAINLY AFTER HE ARRIVED.

The Humane Society of West Michigan is NOT a pet shop. We receive owned and stray animals and rescue sick, injured and abandoned ones. For a few of the owned animals, we will have veterinary records. But for most of those we receive, we will have no medical histories.

In an effort to keep the cat(s) healthy while here, we maintain a clean kennel, keep fresh air circulating throughout the animal housing area, and give each cat a protective vaccination. This vaccine, called an FVRCP, attempts to protect them from Feline Viral Rhinotracheitis, Chlamydia, Calicivirus, and Panleukopenia. However, even an inoculated cat may become ill with any of these conditions since the shot does not provide immediate protection and since the cat may have been incubating the condition before being admitted to the shelter.

FURTHERMORE, CATS ARE PRONE TO A WIDE SPECTRUM OF UPPER RESPIRATORY INFECTIONS FOR WHICH THERE ARE NO INOCULATIONS. THESE INFECTIONS ARE NOT PARTICULARLY THREATENING TO A HEALTHY YOUNG ADULT CAT BUT CAN LEAD TO PNEUMONIA IN A KITTEN OR SENIOR CAT. ALTHOUGH YOUR VET CAN HELP RELIEVE THE BACTERIAL ASPECTS OF THESE INFECTIONS, YOUR VET CANNOT HELP THE CAT OVERCOME THE VIRAL ASPECTS. ONLY WHEN THE CAT'S IMMUNE SYSTEM KICKS IN WILL THE CAT FULLY RECOVER, AND RECOVERY CAN TAKE TIME. **REMEMBER, THERE IS SIMPLY NO GUARANTEE THAT THE CAT YOU ADOPT MAY NOT BECOME SERIOUSLY ILL AFTER YOU HAVE TAKEN IT HOME.**

In their incubation stage, viruses are not detectable. Therefore, an adopted animal may look healthy on the day of adoption and begin to show symptoms of his illness a few days later – at your home.

Apart from the measures we take in trying to keep shelter animals reasonably healthy, there are no other affordable precautions we can take to prevent your pet from becoming ill after adoption.

Please read and sign the following STATEMENT OF UNDERSTANDING:

I understand that the animal I am interested in adopting may require medical treatment that could result in significant veterinary medical bills. I will not hold the Humane Society of West Michigan accountable for the cost of such treatment as the cat may require after adoption.

Signature: _____ Date: _____

Do you consent to Pethealth Inc. collecting and using your personal information (phone and email) for the purpose of contacting you with commercial electronic messaging and telephone communications (including contacting you regarding the Gift of Insurance)?

Please check yes/no.

Yes___ No___

Signature: _____