

Welcome to the  
**Whatcom Humane Society**



**Seeking a  
permanent,  
loving,  
responsible  
home  
for all  
companion  
animals.**

So that we may be assured that the cat you wish to adopt is best suited to you, your home and your lifestyle, and is placed in an environment that is compatible with his/her needs, we ask that you complete this application.

**FOR YOU TO ADOPT AN ANIMAL,  
WE NEED YOU TO....**



Be sure that you are financially able to provide for the animal's needs. This includes food, supplies, license and veterinary care.



Be certain you have adequate time to spend with your new pet, including time for training, exercise and grooming.



Have your landlord's permission to bring an animal onto his/her property.



Have the consent of all adults in your household.



Be at least 18 years of age and have verifiable identification.



Complete this application and discuss it with an adoption counselor.



Understand that this is an adoption, not a sale. WHS reserves the right to postpone or refuse an adoption.

**Thank you!**

# People/Animal Companion Profile

Welcome to the Whatcom Humane Society! This application is designed to help us help you make the best possible choice: the right home for each animal and the right animal for your home.

Please reply to the following question carefully and completely. PLEASE PRINT

## Household Information

Name: \_\_\_\_\_ Email \_\_\_\_\_

Identification: \_\_\_\_\_

Street Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address: (if different) \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

Do you: Rent \_\_\_\_\_ Own \_\_\_\_\_ Live w/parent \_\_\_\_\_ House \_\_\_\_\_ Apt \_\_\_\_\_ Condo \_\_\_\_\_ Mobile \_\_\_\_\_

Landlord/Property Management Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Length of time at address: \_\_\_\_\_ Others living in household (include ages of children): \_\_\_\_\_

## Pet History

What animals do you currently own? (list below)

Species _____
Breed _____ Age _____
Male <input type="checkbox"/> Female <input type="checkbox"/>
Is your animal Spayed or Neutered?
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Is your pet kept:
Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
How long have you had this animal? _____

Species _____
Breed _____ Age _____
Male <input type="checkbox"/> Female <input type="checkbox"/>
Is your animal Spayed or Neutered?
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Is your pet kept:
Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
How long have you had this animal? _____

Species _____
Breed _____ Age _____
Male <input type="checkbox"/> Female <input type="checkbox"/>
Is your animal Spayed or Neutered?
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Is your pet kept:
Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
How long have you had this animal? _____

Whatcom County residents, if you own dogs, are they licensed (required by law)? Yes  No

City of Ferndale residents, if you own cats, are they licensed (required by law)? Yes  No

What inoculations (shots) have your current animals had in the past year? \_\_\_\_\_

What animals have you owned in the past? (list below)

Species _____
Age _____
Male <input type="checkbox"/> Female <input type="checkbox"/>
Was your animal Spayed or Neutered?
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Was your pet kept:
Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
How long did you have this animal? _____

Species _____
Age _____
Male <input type="checkbox"/> Female <input type="checkbox"/>
Was your animal Spayed or Neutered?
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Was your pet kept:
Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
How long did you have this animal? _____

Species _____
Age _____
Male <input type="checkbox"/> Female <input type="checkbox"/>
Was your animal Spayed or Neutered?
Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Was your pet kept:
Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
How long did you have this animal? _____



# CAT ADOPTER SURVEY

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 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 _____ (fill in the blank)				
17	Cats have a tendency to scratch. How will you deal with this issue?				
FOR OFFICE USE ONLY		RECOMMENDED COLOR MATCH: PURPLE ORANGE GREEN RECOMMENDED FELINE-ALITY: _____			

**I certify that all the information in this application is true and I understand that false information may void the application. I also understand that failure to comply with future requirements, such as not providing to follow-up veterinary exam, could result in my inability to adopt other animals from the Whatcom Humane Society.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

# For Staff Use Only

Person # \_\_\_\_\_ Animal # \_\_\_\_\_

Microchip# \_\_\_\_\_ License# \_\_\_\_\_

The best match would be: \_\_\_\_\_

\_\_\_\_\_

### Pending:

Landlord Approval  Obtained  Denied \_\_\_\_\_

Parental / roommate permission  Obtained  Denied \_\_\_\_\_

Is there a file in Petpoint?  Yes  No \_\_\_\_\_

If yes, has this been reviewed with PA?  Yes  No \_\_\_\_\_

Comments: \_\_\_\_\_

### I have reviewed the following cat-related issues with the potential adopter:

- Cat to cat introduction
- Cat to dog introduction
- Litter box issues
- Cats and change
- Scratching
- Declawing
- Identification (lost & found)
- Vaccinations
- Cats and children
- Behavior helpline

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Adoption counselor reviewing application: \_\_\_\_\_ Date \_\_\_\_\_

Adoption finalized:  Yes  No If no, why not? \_\_\_\_\_

\_\_\_\_\_