RSPCA of Central Australia Inc.

Len Kittle Drive, Alice Springs Ph: 08 8953 4430

www.rspca-alice.org.au

Name:

Cat Adoption Application

Office Use
☐ Approved
☐ Not Approved
Date: Signature:

Please return application to asprspca@bigpond.com or in person at the shelter

These questions are aimed at making sure you realise the extra responsibilities that come with owning a cat to ensure they get the very best of homes possible.

Address:				
Suburb:	Postcode:			
Home phone:	Work phone:			
Mobile:	Email:			
Number of people living at premises Adults?	s Children? Ages:			
	lease produce your license or other identification upon request			
ou MUST be over 18 years of ag	ge to be eligible to adopt a feline friend			
. Is there a particular cat/s you	ou saw at the shelter or on our website site that you would			
to apply for?				
Please name it: ID:	Name:			
Please name it: ID:	Name:			
. Is this the first cat you have look	Is this the first cat you have looked at in your current search for a pet? \square Y \square N			
Are you prepared to brush/groom your pet regularly? Y N				
Why do you want to adopt a cat?	?			
Why do you want to adopt a cat?	?			
<u> </u>	? vritten permission from your landlord to have a dog? Please			
If you are renting do you have w				
i. If you are renting do you have w provide us with your landlords le	vritten permission from your landlord to have a dog? Please etter or name and phone number for confirmation that a dog is			
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provide us with your landlords le permitted: Landlord	vritten permission from your landlord to have a dog? Please etter or name and phone number for confirmation that a dog is d/Agents Name: d/Agents Contact Number:			
provide us with your landlords le permitted: Landlord Landlord Do you currently have any pets?	vritten permission from your landlord to have a dog? Please etter or name and phone number for confirmation that a dog is d/Agents Name: d/Agents Contact Number: Yes No			
provide us with your landlords le permitted: Landlord Landlord Do you currently have any pets? Please give breed, size, sex, age	vritten permission from your landlord to have a dog? Please etter or name and phone number for confirmation that a dog is d/Agents Name: d/Agents Contact Number: Yes No e and whether your it is desexed.			
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7.	Keeping in mind that under council by-laws you are only allowed to keep 2 cats without a license, are you prepared to apply for a "kennel license" if this is to be a third addition? [Yes No (Kennel license will need to be approved by Alice Springs Town Council before adoption can proceed)				
8.	Are you current pet/s appro	opriately vaccinated?	s 🗆 No		
9.	Do your present pets (if any) have any behaviour or socialisation problems? If so, please explain:				
10.	Where do your existing pet	s (if any) sleep?			
11.	Where will your new cat sle	ep?			
12.	Do you have a doggie/kitty	door?			
13.		ne past? What happened to the party? Please explain:	nem? Have you ever ta	aken an animal to a	
14.	Does anyone in your house	not want a new cat? If so, pl	ease explain:	s 🗌 No	
15.	Please explain who will be t	he main caretaker of this pet	·		
		adoption with any other breed			
17.	To your knowledge, is anyo	ne in our family allergic to ar	imals? If yes, please e	explain: Yes No	
18.	Are you able to keep your o	at inside for at least two wee	ks while it settles in?	☐ Yes ☐ No	
19.	How many hours will the ca	it be left alone for each day?			
20.	Will the cat be allowed insid	le? How much of the time?	☐ Yes ☐ No		
21.	What will you do with your	cat if you move house?			
22.	Does your job require you t	o move or travel often? Pleas	se explain: Yes	□ No	
23.		ve to travel for work, where v	-	ught about it	
24.		ncil's local regulations regardi to abide by them for your cal		i, eg. Night-time	
25.		has or develops behavioural p	· —		
26.	Under what circumstance w	ould you give up this pet?			
	☐ family illness	☐ meowing	shedding	☐ biting	
	☐ allergic to new cat	scratching furniture	moving house	☐ bored	
	☐ lack of toilet training	☐ high cost vet bills	☐ scratching		

27.	Realising that cats often live 18 years or older, are you willing to take responsibility for your pet's entire life, keeping up to date with vaccinations and worming treatments? Yes No				
28.	28. What will you do if this pet becomes ill or injured and requires expensive veterinary care?				
29.	9. What will you do if your cat is lost?				
30.	Is there anything else you would like to tell us about you, your family or your interest in adopting a cat?				
unt	submitting this application, I agree that all the information I have provided is correct. Providing ruthful answers or failure to comply with the requirements of this application or the signed adoption tract can result in the forfeiture of the adoption.				
	agree to allow us to check the references provided. We will require the successful applicant to sign adoption agreement and allow a property check if requested before adoption.				
We	may also ask to sight your driver's license before the application proceeds.				
	appreciate you taking the time to complete this application. Upon review and approval, we will tact you as soon as possible.				
	appreciate that it is a long application to complete if the application is unsuccessful. We be by completing it you have found out more about your requirements for a cat.				
	reserve the right to refuse any applicant and will not enter into any further correspondence on our ision.				
Sig	ned:				
Dat	te:/				