



Central PA Humane Society (CPHS) 1837 E Pleasant Valley Boulevard Altoona, PA 16602 Phone: (814) 942-5402 Fax: (814) 942-8505 www.centralpahumane.org info@centralpahumane.org

# **CENTRAL PA HUMANE SOCIETY – CAT ADOPTION APPLICATION**

Congratulations! You are beginning the process of bringing a life-long companion and family member into your home. This application is designed to help you select the cat that is best suited to your family and lifestyle.

Completing an application does not guarantee an approval for adoption. Multiple applications may be placed on the same animal. We do not process them on a first come, first served basis. All applications are given equal consideration.

## Only a COMPLETE application will be considered

Please read and initial that you have read and understand the above statement INITIAL:

### Please initial that you have read each line below:

A \$5.00 non-refundable application fee must be paid when submitting your application.

All individuals who live in the home must visit with the shelter cat you are interested in adopting.

- Proof of current rabies vaccination for dogs and cats living in the home is required.
- If you rent, verbal landlord approval is required.
- Current proof of identification is required (driver's license). Must match address on application.
  - After your application is complete, you will be notified if you have been approved or not.

At the time of adoption, you will be asked to complete an adoption contract and pay an adoption fee. Our fees are:

CAT 1 year & over PACKAGE PRICE - \$55.00 KITTEN 11 months & under PACKAGE PRICE - \$80.00

Includes Spay/Neuter, current Rabies & FVRCP vaccinations, FeLV/FIV test, deworming, microchip & adoption fee

Veterans & First Responders get half-off adoption fees. Other specials may apply - ask for details.

PLEASE NOTE: AS A RULE, WE CANNOT HOLD ANIMALS FOR ANYONE. Please keep in mind that there is no such thing as a "PERFECT PET". Any adopted animal will require training, patience and ample time to adjust to its new home. While we carefully monitor animals surrendered to CPHS, we have limited knowledge of their background. Therefore, we cannot guarantee the health, behavior, age, gender, health care, or breed of any animal adopted from the shelter.

I acknowledge the information on this page and agree to the fees noted above.

Print Name

Signature

\$5.00 Application fee paid: □ YES \* Staff to complete Date of Application

□ I am interested in a CPHS membership to save 10% on pet adoptions and other saving benefits.

I am interest	ted in the follow	Office use:				
1 <sup>st</sup> Choice	Intake #	Breed:	Age:	Gender M / F	Spay/Neuter YES / NO	Approved Went with another applicant Customer changed mind
2 <sup>nd</sup> Choice	Intake #	Breed:	Age:	Gender M / F	Spay/Neuter YES / NO	Approved Went with another applicant Customer changed mind
3 <sup>rd</sup> Choice	Intake #	Breed:	Age:	Gender M / F	Spay/Neuter YES / NO	Approved Went with another applicant Customer changed mind

#### **PRIMARY APPLICANT**

Name:					Cell Phone:		
Street A	Address:	es must include a	street name (No PO Bo	x #'s or RD #'s)	Home Phone: _		
City:					State:	Zip	:
Employ	ver:				Work Phone: _		
Email: _					Driver's License		copy required
Are you	u a veteran?	YES 🗆 NO	Are you a Firs	t Responder? 🛛 Y	és 🗆 no	Photo	copy required
CO-AP	PLICANT						
Name:					Cell Phone:		
Employ	/er:				Work Phone: _		
<u>Applica</u>	ant to complete:						
1.	Do you live in a	🗆 House	Apartment	🗆 Mobile Home	e 🗌 Dorm	$\Box$ Other: _	
2.	Do you	🗆 Own	🗆 Rent	Other (please expl	ain)		
	lf you <b>RENT</b> you	r <b>HOME</b> or t	he <b>LAND</b> for your	mobile home, plea	se complete be	low:	
	Homeowners Na	ame:			Phone:		
	Landowners Nar	me:			Phone:		
3.	Does where you	live have ar	y restrictions on J	pets? Weight, type	or number?	□ YES	
	If YES, what are they?						
4.	How many adult	ts live in you	r home?	Children?	Ages o	f Children?	
5.	Is anyone living	in your hous	ehold allergic to c	cats and/or dogs?	□ YES		
6.	Why are you int	erested in a	dopting a cat?				

7. The CPHS believes that adoption is forever, for the lifetime of the pet. Pets can live 10 to 20 years. Are you prepared to provide daily care (time and expenses) for this many years?

	□ YES		RE (explain)					
8.	I want my nev	w cat to be: (c	heck all that apply)					
	🗆 Inside	🗆 Outside	Enthusiastic	🗆 Playful	🗆 Mouser	🗆 La	aid Back	🗆 Lap Cat
	Other: (please	e explain)						
9.	How many ho	ours a day do y	ou spend away fror	n home?		Work	□ School	$\Box$ Other
	While away, how will the new cat spend it's time?							
10.	D. I understand that the procedure of declawing a cat can have long term health and happiness effects, due to the painful and inhumane nature of toe amputation. I have read this statement and agree that I will NOT have this cat declawed. Primary applicant initial: Co-applicant initial:							

- 11. How will you handle a situation if your new cat claws, chews or shows signs of destructive behavior?
- 12. If a personal financial, health or some other situation arises and you cannot keep your pet, you are required to return the pet to CPHS. This way the pet can be re-adopted to another qualified family. If you feel you have a suitable home (i.e. family member/friend) to rehome your pet to instead of returning it, this must first be approved by CPHS. A transfer of ownership contract must be completed (free of charge) before the animal is rehomed. In initialing you understand that this will be part of the adoption contract. INITIALS \_\_\_\_\_\_
- 13. Pennsylvania State Law requires that all puppies/cats that are three (3) to four (4) months of age or older shall receive regular vaccinations against Rabies. We also urge the following precautions:
  - The pet should receive annual vaccines as recommended by your Veterinarian.

	Do you agree with these responsibilities: $\Box$ YES $\Box$ NO $\Box$	NOT SURE (pleas	se explain):				
14.	Pennsylvania State Law requires all animals adopted from shelt period of time. How do you feel about spaying or neutering?			in a specified			
VE	<b>TERINARIAN INFORMATION</b> (if current pet owner)	□ NO PETS CURRENTLY					
Nar	ne of Veterinarian:	Phone Number:					
Pet	Pet Owner's Name on record with Veterinarian						

I understand that I must supply Rabies vaccination records for my pets to CPHS within 48 hours for consideration of my application. Failure to comply within 48 hours may result in revocation of my application. I am aware that prior to placement of a pet from CPHS, my currently owned pets, for their protection, must be up to date on necessary rabies vaccination. **INITIAL:** 

LIST ALL THE ANIMALS THAT YOU HAVE OWNED OR LIVED WITH IN THE PAST FIVE (5) YEARS (LIVING & DECEASED)

TYPE (Dog, Cat, etc)	PET'S NAME	BREED	GENDER	AGE	SPAYED / NEUTERED	Where is this animal now?	How long owned?
					□ YES		
					🗆 NO		
					□ YES		
					🗆 NO		
					□ YES		
					🗆 NO		
					□ YES		
					🗆 NO		
					□ YES		
					🗆 NO		
					□ YES		
					🗆 NO		
					□ YES		
					🗆 NO		

□ **NO PETS CURRENTLY** Please check if applicable

### **CPHS STANDARDS FOR ADOPTION**

- All persons living in the household are to meet with and be involved in the selection of the pet.
- All adopted pets are always to be current on vaccinations and rabies inoculations.
- NO animal will be adopted as a gift for another person.
- Cats are to be indoor pets only and are not permitted to be let or kept outdoors.
- No animal will be adopted to persons having extensive history of losing, giving away, selling or having animals injured or killed by moving vehicles.

# I (WE) CERTIFY THAT ALL INFORMATION GIVEN IS CORRECT AND AGREE TO THE ABOVE CPHS STANDARDS FOR ADOPTION.

Primary Applicants Signature	Date:						
Co-Applicants Signature	Date:						
We are interested in how you heard about this animal(s)   Visit to Shelter Petfinder Website   Facebook WTAJ TV Petco   CPHS Website							
□Twitter □Referred by someone □Referred by Rescue Group □Other							
NEWSPAPERS:	□ Tyrone Herald □Cent	re Daily Times 🛛 Traders Guide					
RADIO: WALY 104 WFBG		□WBQX (Q94)					

# CPHS VISITOR WAIVER AND RELEASE OF LIABILITY FORM

# This form must be signed prior to visiting any animal at the Central PA Humane Society (CPHS)

I wish to visit with shelter pets at CPHS. I understand that I do so at my own risk. I hereby release and waive all claims against the CPHS and the entities affiliated with the foregoing from liability for any and all loss, damage, injuries, claims, demands, lawsuits, expenses and any other liability of any kind, of or to me, any child (children), or any other person directly or indirectly arising out of, or in connection with my visit.

Visitor(s):					
Visitor's Name:	Visitor's Signature:				
Visitor's Name:	Visitor's Signature:				
Visitor's Name:	Visitor's Signature:				
If visitor(s) is under 18 years of age they must be ac	companied by parent/guardian and parent/guardian must sign:				
Child's Name/Age:	Parent/Guardian Signature:				
Child's Name/Age:	Parent/Guardian Signature:				
Child's Name/Age:	Parent/Guardian Signature:				
Child's Name/Age:	Parent/Guardian Signature:				

Once again, we thank you for visiting the shelter and spending time with our animals. We will review your application and contact you after review.

# **CPHS MISSION STATEMENT**

To prevent animal neglect and cruelty through education and enforcement while providing a safe haven and finding forever homes for those in need.

The Central PA Humane Society (CPHS), serving Blair and surround counties in Pennsylvania, is a charitable, non-profit 501(c)(3) organization dedicated to helping animals and people. The primary goal of CPHS is to find loving homes for adoptable animals.

# THIS PAGE IS FOR SHELTER USE ONLY

Primary Applicant Name:		_ In Petpoint? 🗌 YES 🗌 I				
Co-applicant Name:		In Petpoint		□ YES		
Comments:						
CPHS Standards for Adoption Signed:	□ YES					
Landlord contacted	□ YES		□ N/A	Date: _		
Landlord approved	□ YES		□ N/A	Date: _		
Vet records received	□ YES		□ N/A			
All family members visited	□ YES		Still to visit			
SHELTER APPROVED:	□ YES					
If yes, by whom:						
If no, then why?						
Applicant Contacted	Date:					Time
NOTES: Include complete dates. Ir	nitial your note	S				



### CPHS - Adopter requirements to complete an application.

Thank you submitting an adoption application for a shelter pet! The following needs to be completed before your application is considered complete

- □ All people living in the home are required to visit with the animal you wish to adopt.
- □ If your dog has never lived with cats, we may require you bring your dog in to test them with a cat. This is for the safety of the cat you wish to adopt.
- □ Proof of current rabies vaccinations are required for all dogs and cats in your home this is a state mandated requirement. If your pet is not current on rabies CPHS can sell you a pre-paid voucher to have your pet vaccinated by the CPHS veterinarian on a Wednesday or Friday morning. Or you are welcome to book your pet in with your veterinarian, however please note this can often delay your application as we require proof of the vaccination being completed.
- □ If you rent your home, (or the land your mobile home is on), your landlord (or the landowner) is required to verbally approve with CPHS staff that you are allowed to have the pet you wish to adopt in that home/on the premises. CPHS staff will call the landlord/land owner to ask them for approval for you to have that pet. If you have not spoken to your landlord we recommend you do so and know what your pet policy is.

I understand what is required of me to complete my adoption application: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

\_\_\_\_\_



#### **CPHS Adoption criteria**

#### Please review what is required of you to complete your adoption application

Thank you submitting an adoption application for a shelter pet! The following needs to be completed before your application is considered complete.

- $\Box$  All people living in the home are required to visit with the animal you wish to adopt.
- □ If your dog has never lived with cats, we may require you bring your dog in to test them with a cat. This is for the safety of the cat you wish to adopt.
- □ Proof of current rabies vaccinations are required for all dogs and cats in your home this is a state mandated requirement. If your pet is not current on rabies CPHS can sell you a pre-paid voucher to have your pet vaccinated by the CPHS veterinarian on a Wednesday or Friday morning. Or you are welcome to book your pet in with your veterinarian, however please note this can often delay your application as we require proof of the vaccination being completed.
- □ If you rent your home, (or the land your mobile home is on), your landlord (or the landowner) is required to verbally approve with CPHS staff that you are allowed to have the pet you wish to adopt in that home/on the premises. CPHS staff will call the landlord/land owner to ask them for approval for you to have that pet. If you have not spoken to your landlord we recommend you do so and know what your pet policy is.

Until ALL criteria is met, your application is NOT considered complete, and it CANNOT be reviewed by an adoption counsellor. It is your responsibility to follow up and make sure that you meet the requirements. Ideally an application should be completed within 48 hours.

After the initial call is made to your landlord for approval or your veterinarian for veterinary records, CPHS are not responsible for continuing to follow up for a response. You can assist this process by making sure your landlord or veterinarian responds to our initial inquires.

NOTE: Multiple applications are taken on animals. CPHS does not work on a first in, first served basis. We look for the best match between applicants and animal. Dogs are assessed and that assessment will be reviewed by the adoption counsellor when taking into consideration multiple applicants. Please understand that if you miss out of your choice of animal this does not reflect on you as a pet owner or possible adopter. Our goal is to best match the pet for the family. This can lead to disappointment for some, but please be assured we will continue to work with you to find a pet that is perfect for you!

Given to applicant on: \_\_\_\_\_

Date