



FELINE ADOPTION APPLICATION

502-875-3436

ContactUs@lifehouse4animals.org

I am interested in adopting: _____ If under 18 please list your age: _____

Name: _____ Date _____

Address: _____ City/State: _____

Phone Number(s): _____

Email: _____

Are you employed? Yes No

Employer : _____

Employer Phone Number: _____

Spouse's Employer: _____

Employer Phone Number: _____

Do you own the home at this address? Yes No

If you rent or live with someone else are pets allowed? Yes No

Landlord/Property Owner: _____ Phone number: _____

How long have you lived at this address? _____

Do you expect to be moving within the next year? Yes No

If yes, to what type of residence? _____

Are you looking for an indoor or an outdoor pet? _____

Is everyone in the household agreeable to adding a new pet to the household? Yes No

Are you prepared to care for this pet for the rest of its natural life? _____

Do you live in: City Suburb Rural Other: _____

Are there children at this address? Yes No If so, list ages: _____

Is anyone in your home allergic to animals? Yes No

If so, how do you plan to deal with this? _____

Are there other animals in the home? Yes No

Name _____ Breed: _____ Age: _____ Spay/Neuter Yes No

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Name _____ Breed: _____ Age: _____ Spay/Neuter Yes No

Are all your animals up to date on vaccines? Yes No If not, who: _____

List pets you've had in the past and what happened with them.

Please list your veterinarian's name and phone number*: _____
-OR- list the location and provide record from annual low cost vaccination clinic: _____
(If under someone else's name please list: _____)

***Please contact your vet to notify them a representative will be calling and that they have permission to disclose information about your pet(s).**

Personal references – please give name and current contact information - **must not be related to you or living at the same address**

1. Name _____ Phone Number _____
2. Name _____ Phone Number _____
3. Name _____ Phone Number _____

Who will feed and exercise the pet? _____

How many hours a day will the pet be left alone while you are at work or school? _____

Where will the pet stay during the day? _____

Where will the pet sleep at night? _____

What arrangements will be made when you are away overnight or on vacation? _____

For what reason(s) would you give up your pet(s)? _____

Explain what you will do if you can no longer care for your pets: _____

May we visit or contact you before and after you adopt? Yes No

How did you learn about L.I.F.E. House and/or this pet? _____

LIFE House is a non profit organization. Our animals are not for sale, they are for adoption, which means that a home must meet approval before adopting a pet, including but not limited to filling out this form, additional interviews, meeting with the prospective pet, and a signed contract. In addition LIFE House for Animals reserves the right to turn down a prospective adoption at any time during this process for any reason.

Applications not completely filled out could result in delay or prevention of adoption.