

P.O. Box 11133 Prescott, AZ 86304 • 928.778.2924 • www.unitedanimalfriends.org

## Courtesy Listing Agreement and Questionnaire - Cat

Cat Inform	nation (This information	າ will be use	ed to create th	e cat's biogra	ıphy)		
Date	Cat's Na	me					
Breed(s): _	Color(s):						
Age	Gender □M □F Spayed/Neutered □Yes □No				Approximate Weight		
Cat's pers	onality - check all that	t apply:					
□Shy	□Outgoing	□Easygo	oing 🗆	]Playful	$\square$ Dominant	□Quiet	
□Friendly	□Excitable	□Reserv	red □	]Timid	□Affectionate	□Mellow	
□Cuddly	□Likes to be held	□Tolerat	es being pick	ed up			
Cat's beha	viors - check all that a	apply:					
□Scratche	es □Nippy □Es	scapes	□Aggressive	e □Accus	stomed to carrier	☐Tolerates car rides	
What is yo	our cat's energy level?	P □Hi	gh 🗆	Medium	□Low		
Is cat frien	adly with: Children	□Yes □No	∪Unknown		Men □Yes □N	lo □Unknown	
Women □	lYes □No □Unknown	Cats [	]Yes □No □	Unknown	Dogs □Yes □I	No □Unknown	
Cat's Trair	ning - check all that ap	oply: □Lit	tter box traine	d	☐Leashed Trair	ned	
This cat cu	rrently lives □Indoors	s □0:	utdoors	□Both			
Is cat a hur	nter? □Yes □No						
How long h	nave you had this cat? _						
How did yo	u obtain this cat?						
Would this	cat do well in a multi-ca	at environm	ent? □ Yes [	□ No □ Dor	ı't know		
Brand of fo	od used			Amou	nt of food		
List any spe	ecial needs or concerns	3					
Reason for	re-homing:						
Release of	Veterinary Records						
My veterina	arian is				Phone:	_	
I agree that	t UAF can obtain veteri	nary record	s regarding m	y cat,			
I also agree	e to phone my veterinar	ian clinic to	tell them that	I am permittir	ng the release of th	e cat's medical records.	
Guardian S	Signature:				Date:		

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## **Courtesy Listing Agreement**

I understand that United Animal Friends (UAF) cannot take my cat into its foster system but will help me promote my pet to potential adopters.

Showing my cat at adoption events greatly increases the chance of adoption, therefore I agree to attend events whenever possible. While showing my cat at an adoption event, I will hold UAF and the adoption site property owners harmless for any situation that might arise.

I understand that my cat cannot be courtesy listed or taken to adoption events without the following documentation:

- Proof of spay/neuter for cats older than four months of age
- Proof of FVRCPC (Feline Rhinotracheitis, Calici, Panleukopenia, Chlamydia Psittaci, R.I.) vaccination
- Proof of a negative result for FeLV-FIV feline leukemia virus and feline immunodeficiency virus tests
- Health report from local veterinarian for cats older than eight years

While attend adoption events, I agree that:

- My cat is to be in an appropriate cat carrier and under the control of an adult at all times.
- I will not interfere with UAF adoptions.
- If my cat cannot be handled safely or if I am asked to leave for any reason, I will promptly and respectfully leave the adoption event.

I permit UAF to publish photos and descriptions of my pet on its website and other resources. UAF volunteers will verify adopter application information. If an adoption occurs as a result of UAF efforts, I will collect a specified donation to UAF from the adopter and forward this donation to UAF along with a copy of the UAF adoption agreement. UAF will oversee as a private party adoption and will not be liable in any way for the success of the placement. I understand that if the adoption fails, the cat will be returned to me.

I understand that re-homing can take a long time, so I will pursue other options, if I cannot keep the cat beyond a specific date. I agree to notify UAF immediately if the cat becomes unavailable for adoption.

I understand that it is UAF's policy not to adopt pets to those who have courtesy listed a pet.

## **Acknowledgement and Agreement**

I understand and agree to the above terms

Guardian Signature	Date				
Guardian Name(s					
Address	City	Zip			
Home Phone	Cell phone				
E-mail					
UAF Representative Signature	Da	te			

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