

UNITED ANIMAL FRIENDS ON A RESCUE MISSION

Matchmaking Questionnaire – Cats

United Animal Friends (UAF) is dedicated to matching each animal in our care with the most compatible home. Submission of this questionnaire does not obligate you to adopt, nor does it guarantee that you will be selected to adopt. Incomplete applications will not be considered. United Animal Friends will conduct a search of public records on all applicants, including a criminal database check. By submitting this application, you give UAF express authorization to contact your veterinarian and landlord, if applicable.

Cat(s) of Interest

Someone already caught your eye? If so, please specify: _____

Family Information

Number of adults in household _____ Number of children _____ Ages of children _____

Full name(s) and date(s) of birth of **ALL** adults in home:

Adult #1 _____
First Name Middle Name Last Name Date of Birth

Adult #2 _____
First Name Middle Name Last Name Date of Birth

Adult #3 _____
First Name Middle Name Last Name Date of Birth

Adult #4 _____
First Name Middle Name Last Name Date of Birth

Home Phone _____ Work _____ Cell _____

Email address Adult #1 _____ Email address Adult #2 _____

Residence Information

Home address _____

City _____ State _____ Zip _____

Mailing address (if different) _____

House Condo Mobile Duplex Apartment

Do you own or rent your home? Own Rent How long at present address? _____

Does your community restrict the number of pets? Yes No If yes, what is the pet limit? _____

Required if you rent: Landlord's name _____ Phone # _____

Matchmaking Background

Who will be responsible for this cat? _____

Describe the activity level of your household: Quiet Moderately active Active Very active

How often will the cat be fed? Once daily Twice daily Free-fed

Matchmaking Questionnaire for Cat(s) Continued - Cat Applied For: _____

Where will the cat stay? Inside only Inside/outside Outside with shelter

Where will the cat stay during vacation? _____

How many hours per day will your cat be unattended? _____

In the event that you may no longer be able to care for your cat, who would adopt your cat? _____

Please check the reason(s) why you want to adopt a pet at this point in your life:

Want a companion Playmate for child(ren) Playmate for other pet(s)

Do you currently have a dog(s)? Yes No If yes, how many? _____

If yes, describe breed, sex, age, temperament _____

Do you currently have a cat(s)? Yes No If yes, how many? _____

If yes, describe breed, sex, age, temperament _____

Is your pet(s) spayed/neutered? Yes No Up to date on vaccinations? Yes No

Do you have a veterinarian? Yes No Vet's name _____

What would cause you to return this cat? (check all that apply)

Allergies Change in marital status Not compatible with other pets Moving
 New baby Cat's health issues Personal health issues Vet bills
 Job change Destructive behavior Kids not taking care of pet Aggressiveness

Have you ever adopted a pet from United Animal Friends? Yes No

Have you ever adopted a pet from another rescue group or shelter? Yes No

Have you ever surrendered a pet to a shelter or rescue group? Yes No

How did you hear about UAF?

UAF website UAF newsletter Petfinder Adoption event/Petco Facebook Vet Ad Friend

Acknowledgement and Agreement

I understand that United Animal Friends will conduct a search of public records on all applicants, including a criminal database check. By submitting this application, I give United Animal Friends express authorization to contact my veterinarian and landlord, if applicable. I understand that submission of this questionnaire does not obligate me to adopt, nor does it guarantee that I will be selected to adopt, and that the decisions of the application review board are final.

I certify that the information supplied in this application is true, accurate and correct.

Signature _____ Date _____