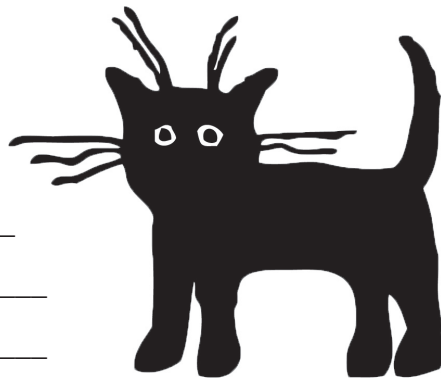


ASAP ADOPTION APPLICATION

Thank you for completing this application and contract. The information that you provide will help ensure a successful adoption.



Today's date _____ Adoption date (ASAP to complete) _____

Cat #1 _____ KC# _____ Intake date _____

Cat #2 _____ KC# _____ Intake date _____

Name: _____ Spouse or partner's name: _____

Current address (incl. street/unit/city/zip): _____

Students, please provide home address: _____

Phone (primary): _____ Phone (other): _____ E-mail: _____

You are: employed full-time employed part-time retired student other: _____

Number of hours an adult is usually at home: all day out part-time away 7 or more hours per day

Driver's license #: _____ State: _____ Expires (mm/dd/yy): _____ Volunteer initials: _____

When you have completed this form, please present your license to your ASAP adoption counselor.

Do you own your residence? Yes No

If you do not own your residence, please provide the full name and phone number for the owner/landlord:

Name on title of residence (if known): _____

How long at current residence? _____ Do you plan to move in the coming year? Yes No

Number of adults in household: _____ Number and ages of any children in household: _____

Full names and phone numbers for all adult co-tenants/housemates: _____

Note: All adult co-tenants/housemates must consent to the adoption.

Do you have consent from all adult household members to adopt a cat(s) or kitten(s)? Yes No

Household activity is usually: low medium high

Have you had a cat(s) in the past 5 years? Yes No If yes, do you still have the cat(s)? Yes No

If no, what happened to the cat(s)? _____

List cats in household (include sex, age, and if spayed/neutered): _____

List dogs in household (include breed, sex, age, and if spayed/neutered): _____

Has/have the dog(s) lived peacefully with cats? Yes No

List any other pets: _____

What type of cat are you looking for? indoor only indoor/outdoor other: _____

Name of local veterinarian: _____ Can ASAP call for reference? Yes No

Would you like to receive coupons or promotional material from Hills/Science Diet? Yes No

How did you hear about ASAP? _____

To ensure the safety of the cat(s), ASAP reserves the right to conduct a property inspection when applicable. A cat or kitten is not to be given as a gift. The person completing this adoption application and the following contract is to be the caregiver of the adopted cat(s) at the address stated above.

ASAP ADOPTION CONTRACT

Cat name(s) _____

The average lifespan of a cat is about 15 years. Are you prepared to make a long-term commitment to owning a cat? Yes No

Are you prepared to assume financial responsibility for your new cat? Have you considered the cost of food, litter, other supplies, and regular or extraordinary veterinary care should your cat become ill? Yes No

In the event that the cat becomes ill within two weeks of adoption, you may call ASAP and request assessment by ASAP veterinary staff. Please refer to the back of your cat's vet record for instructions. If the cat receives any treatment at any veterinary facility without ASAP Board approval, treatment and/or veterinary costs will not be reimbursed.

Do you understand the two-week veterinary policy period and procedures for veterinary treatment and reimbursement following adoption? Yes No

Adopter, please initial here: _____

All cats benefit from living indoor-only, but some cats must be kept indoors. Certain physical features such as light-colored (e.g., white or pink) ears and/or noses require that the cat not have direct or prolonged sun exposure because of the danger of cancer. A declawed cat must be kept indoors at all times.

Will your new family member be an indoor-only cat? Yes No

Volunteer, initial if this cat must be indoor only: _____

Cats require time to get accustomed to their new owner, home, and surroundings. Additionally, coyotes pose a significant danger throughout our community. The danger is especially high at night, and near sundown and sunrise.

If your cat will be indoor/outdoor, do you agree to keep it confined indoors for a minimum of two weeks following adoption, allowing time for it to acclimate to the new environment? Yes No
 N/A, indoor only

If your cat is to be an indoor/outdoor cat, do you agree to confine it indoors each night before sundown and until after sunrise? Yes No
 N/A, indoor only

Adopter, please initial here: _____

Kittens must be kept strictly indoors until they are a minimum of six months old. If you have chosen a kitten, do you agree to keep it indoors until it is at least six months of age? Yes No
 N/A, adult cat

Do you agree not to declaw this cat/these cats? Yes No

I, the adopter, certify that the preceding information is true and accurate. Additionally, as the new owner of this cat or cats, I understand the risks of owning this cat, freely accept them, and waive any rights to make a claim against the County of Santa Barbara or ASAP, or to file a lawsuit against the same in the event that the cat bites, causes injury, destroys property, or succumbs to health problems that existed before or at the time of transfer.

Signature _____ Date _____

For ASAP Lead Volunteer/Adoption Counselor Use Only

Full names of volunteers who obtained homeownership/landlord approval _____

Homeowners: Property ownership verified Yes No Volunteer initials _____ Date _____

Renters: Property ownership verified Yes No N/A _____

Landlord approval obtained Yes No Volunteer initials _____ Date _____

If pet deposit required, has it been paid? Yes No N/A

Have all adult members of the household agreed to this adoption? Yes No Volunteer initials _____ Date _____

Methods of verification/approval _____

Adoption approved Volunteer initials _____ Date _____

Adoption denied Reason for denial: _____

Adoption Counseling Checklist

Full names of adoption counselors _____

Veterinary record Full copy of this form to adopter General counseling packet Behavior counseling, if needed

Separate room Food and litter samples Two-week vet care policy Introduction to resident pet(s), if needed