Name/Description of Cat		Date:
	4 PRECIOUS PAWS RESCUE INC	
	MA LICENSE #355	

ADOPTION APPLICATION

This form is designed to help you find the cat most compatible with your lifestyle. Please respond to the questions below as completely as possible.

In order to be considered as an adopter you must: 1. Be 21 years of age. 2. Have a valid drivers license or government issued ID. 3. Have the knowledge and consent of your landlord if renting. 4. Be willing and able to provide proper care, training, and medical treatment.

Name:				
Street Address:				
City:	State:		Zip:	
Phone:				
Email Address:				
	Employer:			
Employer Address:	0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		7-0-0-0-0-0-0-0-0-0-0-0-0	03(-11-20
Number of Adults in Household Are all the adults in your house in agreement: yes no Do you own or rent your home: Who will be the primary caregivels any member of the household How many hours a day with the Where will the cat be kept? Indeptions	hold aware that y ver for your new of d allergic to cats? e cat/kitten be wi	cat?thout hum	pting a cat and	
other, please specify:				
Will you have the cat declawed:	yes no n	naybe		
Is this your first cat:				
Are there other animals in the h	nouse? <i>yes n</i>	0		
Please specify:				
Name and phone number of cu	rrent Veterinaria	n (if applicat	ole):	