

GEORGINA FERAL CAT COMMITTEE – Application to Adopt or Foster

Check any/all that apply:

I am interested in short term fostering: ____ (overnight, vacation coverage, emergencies)

I am interested in long term fostering: ____ (safe haven until cat is adopted)

I am interested in adopting: ____ If a specific cat, describe/name: _____

PERSONAL CONTACT INFORMATION:

Full Name: _____

Age: _____ Occupation: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Address _____

City: _____ Province: _____ Postal Code: _____ Email: _____

Best time/method to reach you: _____

PERSONAL HISTORY:

1. Do you have children in the home? Yes: ____ No: ____ If yes, age(s): _____

Have they been taught to handle animals correctly? What type of supervision will your children have while with the pet?

2. Do you have any pets (cats, dogs, other)? Yes: ____ No: ____

If yes, list names, ages, breeds: _____

3. Do you know how to gradually introduce new pets to old? Yes: ____ No: ____ (if not, please discuss)

4. Have you and your family had cats previously? Yes: ____ No: ____

5. What best describes your living situation?

Own: ____ Rent: ____ / House: ____ Apartment: ____ Condo ____ / Live with parents: ____

If renting, does your landlord/property management company have a pet-friendly policy? Yes: ____ No: ____

6. Is everyone in the household in agreement with fostering/adopting? Yes: ____ No: ____

7. How many hours on average would the cat be left unattended? Per Weekday: ____ Per Weekend Day: ____

8. Will you keep the cat inside 100% of the time and be diligent that the cat does not escape? Yes: ____ No: ____

9. Have you or anyone in your family/household ever been charged or convicted of neglect or cruelty to animals? Yes: ____ No: ____

10. As a Foster, are you comfortable with an in home visit from a potential adopter? Yes: ____ No: ____

11. Are you able to transport the cat (to vet, potential adopters, etc.)? Yes: ____ No: ____

12. What size/breed/age of cat would you prefer to foster/adopt? _____

COMMITMENT/HISTORY:

Adoption of a cat is a lifetime commitment that includes financial responsibility, vet visits, etc.

1. Are you prepared for this? Yes: ____ No: ____
2. Do you have any plans to move in the near future? Yes: ____ No: ____
3. For whom are you adopting the cat? Self: ____ Gift for: _____
4. Under what circumstances would you need to give up your cat?

Allergies: ____ Aggression: ____ Cat Illness: ____ Clawing Furniture: ____ Litter Box Issues: ____ Pet Conflict: ____
Divorce: ____ New Relationship: ____ New Baby: ____ High Cost of Care: ____ Shedding: ____

5. Have you ever surrendered or re-homed a pet before? Yes: ____ No: ____

If yes, explain circumstances: _____

6. Have you ever had to euthanize a pet before? Yes: ____ No: ____

If yes, explain circumstances: _____

7. Have you ever had a cat declawed before? Yes: ____ No: ____

8. Problems you are willing to work with your cat on:

BEHAVIOURAL: Litterbox issues: ____ Furniture scratching: ____ SOCIALIZATION: Fearful: ____ Shy: ____ Nervous: ____

I am not willing to work on any problems: ____ I need more information to decide: ____

9. If you have any difficulties with the cat's behavior, who will you call for advice? _____

10. If you must give up the cat, what would you do? _____

11. What will you do with your cat when you go on vacation? _____

12. Does anyone in your family have allergies/asthma? Yes ____ No ____

13. What will you do with your cat if someone developed allergies? _____

VETERINARIAN: (Please contact your vet to give them permission to speak with a volunteer from GFCC):

Veterinarian Name and Phone Number: _____

Veterinarian Address: _____

REFERENCES (please contact them in advance so they know we will be calling)			
Name:	Relationship:	Address:	Phone:

FOSTER/ADOPTION POLICY:

I understand and agree to all of the following:

- If the animal is on medication I will continue the medication as directed.
- I will not let the animal outside.
- I will not declaw the animal.
- If, during the time I am fostering the animal, it requires medical attention, I will contact Georgina Feral Cat Committee as indicated at the bottom of this application immediately.
- I will not sell, trade or dispose of the animal.
- Anyone interested in adopting my foster cat (including myself) must go through the standard adoption process, and approval of candidates and placement of animals is up to Georgina Feral Cat Committee.
- I receive the animal(s) at my own risk and can reject or return any animals to Georgina Feral Cat Committee. I indemnify and hold Georgina Feral Cat Committee free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind and description which may occur to or be suffered by me, members of my household, or any third parties by reason of activities arising out of this agreement. I release Georgina Feral Cat Committee from responsibility for any diseases that may be contracted by my resident animal(s) from the foster animal.
- In the event an adopted animal is received and not already spayed/neutered, as in the case where it is still too young, I will follow through with spaying/neutering as soon as it is old enough.

DECLARATION:

By submitting this application, I affirm that what I have submitted is true and complete. I also understand and agree to the policy as outlined above.

Name (print): _____ Signature: _____ Date: _____

THANK YOU for opening your heart and home! If you meet the requirements for the cat you are interested in we will contact you. Please be patient - we are volunteer run and have full time jobs and lives outside of rescue.

If you have any questions about this application, please contact Georgina Feral Cat Committee by email at: georginaferals@gmail.com or by phone at: 289 231 7230 or Facebook messenger: [Facebook.com/GeorginaFeralCatCommittee](https://www.facebook.com/GeorginaFeralCatCommittee)