

# Cat Foster Application

**H.O.P.E. Safehouse, Inc.**  
**1911 Taylor Ave.**  
**Racine, WI 53403**

**Pet's Name** \_\_\_\_\_ **Confirmed** \_\_\_\_\_  
**Date/time** \_\_\_\_\_ **By** \_\_\_\_\_

**Date** \_\_\_\_\_ **Time** \_\_\_\_\_ **Approved/Rejected By**  
\_\_\_\_\_

**Counselor** \_\_\_\_\_

**Please print and complete the form below and return to the address above:**

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Maiden Name \_\_\_\_\_

Spouse/Roommate \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Maiden Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Length of time at this address \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

Length of time at this address \_\_\_\_\_

Current Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Spouse Work  
Phone \_\_\_\_\_

Drivers Lic. # \_\_\_\_\_

Do you own/rent Landlord's name & # \_\_\_\_\_

No. of adults in household \_\_\_\_\_

No. of children in household \_\_\_\_\_

Ages of children \_\_\_\_\_

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**Employer:**

Applicant \_\_\_\_\_ Phone \_\_\_\_\_ Shift \_\_\_\_\_

How long employed here \_\_\_\_\_

Spouse/roommate \_\_\_\_\_ Phone \_\_\_\_\_ Shift \_\_\_\_\_

How long employed here \_\_\_\_\_

Have you ever trained a kitten before: yes \_\_\_ no \_\_\_

Have you ever trained an adult cat: yes \_\_\_ no \_\_\_

Do you have a carrying crate: yes \_\_\_ no \_\_\_

Do you have any allergies to pets: yes \_\_\_ no \_\_\_

Do you have a scratching pole: yes \_\_\_ no \_\_\_ Will this be your first cat: yes \_\_\_ no \_\_\_

Have you ever gone to pet classes: yes \_\_\_ no \_\_\_

Have you ever had to get rid of a pet: yes \_\_\_ no \_\_\_

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Who will be responsible for feeding, training, and vet care \_\_\_\_\_

How many hours will the cat be left alone \_\_\_\_\_

Where will the cat be housed:(circle all that apply) Indoor only Outdoors only In & Out Barn

Other (explain)

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**Current Pets (list only canines and felines) Write None, if you currently have no pets**

**Dog/cat - Name - Age - How long have you had it - Kept in or outside - What vet do you use with this pet**

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**Past Pets: List all pets owned in the last 10 years. Write None if you have had no other pets in the last 10 years.**

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**Breed - Name - Purchased from where and at what age - How long did you have it - Where is pet now**

List all veterinarians you used with these pets: (include clinic name, phone & city)

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**Please read and sign:**

*I certify that all information I have given on this application is true. I understand that any false information, unanswered questions or omitted information will result in immediate rejection.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse \_\_\_\_\_ Date \_\_\_\_\_

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**OFFICE USE** -----

**Verified :** Address \_\_\_\_\_ Visual \_\_\_\_\_ Employment \_\_\_\_\_ Reference \_\_\_\_\_

Landlord \_\_\_\_\_ File \_\_\_\_\_

Pet History

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