

11. Under what circumstances would you return this animal?

- Moving New Baby Divorce New Relationship Cost of medical care
 Allergies Vacation Retiring Claws Furniture Poor Mouser
 Digs in Plants Other _____

12. Please indicate which answer applies to your preference for personality:

I would consider my household to be a Library Middle of the road A carnival

I want my cat to enjoy being held Little of the time Some of the time Most of the time

I want my cat to be active Not very active at all Somewhat Yes, very

My cat will be Inside Outside Both

I prefer my cat to be talkative Yes No Doesn't matter

I am comfortable with a cat that likes to "chase my ankles" and similar games Yes / No / Somewhat

I want my cat to interact with guests that come to my house Little of time Sometimes Always

13. It is most important to me that my cat: _____
(Fill in the blank)

14. DCAS cannot guarantee the health of your adopted pet. We offer 6 weeks of FREE/complimentary pet insurance with Securican Insurance to cover any potentials health issues. **We will register you unless you indicate otherwise by initialing below.** Registration involves releasing your name, address, phone number and or email if available. Securican will not provide your information to anyone else and will contact you ONCE at the end of the complimentary coverage to see if you want to register for a plan.

Do not sign me up for insurance: _____

15. Please provide a personal reference (other than a family member or person you live with) that is aware of your experience as a pet owner?

Name: _____ Phone: (_____) _____

Adopters Signature _____ Date: _____

Shelter Staff Use:

Matchmaker: _____ Date: _____

References checked by: _____ Date: _____

Date of adoption: _____