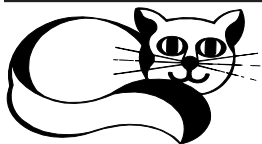


Adoption Questionnaire



Volunteer Humane Society

505 Center Bridge Road

Lancaster MA 01523 -2277

978-365-9470

Email: catshelter@hotmail.com

Office Use Only:
Deposit Amount

Kittens (Birth to 10 months old) are \$140.00 each or Two for \$250.00

Cats (10 months to 7 years old) are \$100 each

Senior Cats (7 years or older): Please see the adoption counselor.

Adoption Cat's Name: _____ Date: _____

Your Name _____

Address (not PO Box): _____

Town _____ Zip _____

Home Phone _____ Work Phone _____

Landlords Name, Address and Phone _____

Who is your veterinarian? _____

How much do you believe you will spend each year for basic care of your pet? _____

Are you aware that your pet must be kept current on its rabies vaccine, according to Massachusetts law? Yes No

Cats live for 15 years or more. Are you ready to make that commitment? _____

Do you have other pets? Please list them, their species and their ages. _____

Are your other pets up to date on their vaccinations? _____

Has a cat in your household died in the last six months? _____

Have you ever surrendered an animal to a shelter? _____

By my signature I certify that all of the information I have given is true.

Signature _____

Date _____

Office Use Only:

Paid via (circle one): Cash Check # _____