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Feline Adoption Application

Harvest Sky Animal Rescue Society, hereby known as the HSAR

To be considered as a potential adopter, you must:

- Be at least 18 years of age
- Have identification containing your address
- Be able and willing to spend the time and money necessary to provide training, medical treatment, and other proper care for a pet
- Have the knowledge and consent of your landlord and show written proof of lease/rental agreement in your name (if applicable)

Completion of this form DOES NOT guarantee adoption of an HSAR animal.

Contact Information:

Name: _____ Date: _____

Mailing Address: _____ Physical Address: _____

Street/P.O. Box _____ Street _____

City, Province _____ City, Province _____

Postal Code _____ Postal Code _____

Phone # (Day): _____ Phone # (Cell): _____

Email: _____

Preferred Contact Method: _____ Feline Applying For: _____

Employer: _____ Phone #: _____

Please provide 3 references: (co-workers, veterinarian, pet-sitters, etc)

Name: _____ Phone (Day): _____

Relationship: _____ Phone (Cell): _____

Name: _____ Phone (Day): _____

Relationship: _____ Phone (Cell): _____

Name: _____ Phone (Day): _____

Relationship: _____ Phone (Cell): _____



Questionnaire:

The purpose of this questionnaire is to select the most compatible home for all our animals. Thank you for your patience to take the time to complete this form.

- 1) How did you hear about the HSAR and the animal you are interested in adopting?
 - a) www.harvestskyrescue.ca
 - b) Kijiji
 - c) HSAR Facebook Page
 - d) Word Of Mouth
 - e) Other (specify) _____
- 2) Do all adult members of the household know that you plan to adopt a pet? **Y N**
- 3) Who will be responsible for this animal? _____
- 4) Are you willing to have a HSAR representative come to see where the animal will be living?
Y N
- 5) Do you live in a:
 - a) House
 - b) Apartment
 - c) Other (specify) _____
- 6) Do you:
 - a) Own
 - b) Rent
 - c) Live with parents
 - d) Have roommates/shared accommodations
- 7) If you rent, do you have written permission from your landlord to have a pet? **Y N**
- 8) How long have you lived at your current address? _____
- 9) Do you anticipate moving within the next 6 months? **Y N**
- 10) Do you have children at home? **Y N** Ages: _____
- 11) Have you ever had a pet before? **Y N** Type: _____
- 12) Was it neutered/spayed? **Y N** How long did you have it? _____
 - a) If you no longer have it, why? _____
- 13) Do you have any pets at home now? **Y N** Type: _____
- 14) Are all of your pets healthy and current on their vaccinations? **Y N**
- 15) Will your other pets accept this new pet? **Y N**
- 16) Where will this animal live? Sleep? Go to the bathroom?
 - a) House a) House a) Yard
 - b) Barn b) Barn b) Litter Box
 - c) Shop c) Shop c) On Walks
 - d) Outdoors d) Outdoors
 - e) Crate e) Crate
- 17) Why do you want to adopt a pet? _____
- 18) Is anyone in your house allergic to animals? **Y N**

- 19) Under what circumstances would you give up this new pet? _____

- 20) Have you given away/surrendered a pet in the last 6 months? **Y / N** Why? _____

- 21) What will you do if the pet shows some behaviour problems such as hissing, biting, or eliminating in the house? _____

- 22) Do you plan to declaw the cat(s)? **Y N**
- 23) Owning a pet costs approximately \$1000/year for food, supplies, & vaccinations, not including unexpected medical care. Are you willing to spend this much or more for the care of this animal? **Y N**
- 24) Cats often live longer than 12 years. Can you be responsible for this animal for its entire life? **Y N**
- 25) Do you agree to provide a good permanent home, sufficient water, food, shelter, medical care, and humane treatment for this animal at all times? **Y N**
- 26) We may contact you for an update to help ensure the animal successfully adjusts to its new life. Do you consent to home visits and/or phone calls after adoption? **Y N**

PLEASE NOTE THE HSAR RESERVES THE RIGHT TO REFUSE ADOPTIONS.