



# NRAS

Northern Rivers Animal Services Inc.  
PO Box 447, Ballina, NSW 2478  
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ABN: 16 055 396 731  
CFN: 17290

## CAT ADOPTION QUESTIONNAIRE

**Thank you for applying to adopt a rescue cat and saving a life!**

These questions are aimed at making sure you realise the extra responsibilities that come with owning a cat, to help determine what type of cat you are looking for, and to assist us in finding the right cat for you. We endeavour to find loving, responsible, forever homes for our animals so please answer all questions as accurately as possible.

Completion of this questionnaire **does not guarantee the adoption** of a cat from Northern Rivers Animal Services. This questionnaire is a tool designed to help NRAS source the best possible forever homes for the cats we have in care. In some cases, more than one application is received for the adoption of an NRAS cat. The decision is then with NRAS as to which application is the most suitable.

If the application is successful, the adoption fee must be paid in full prior to the release of the cat. All NRAS cats are subject to a two week trial. If you decide during the two week trial that you do not want to keep the cat, then when you return the cat to NRAS the **adoption fee minus \$25 is refunded**.

Cat's Name (If specific interest):

### CONTACT DETAILS

Name

Address

Postcode

Phone

Email

Date

### YOUR PREFERENCES

Breed

Colour

Age

Male

Female

Size

S

M

L

Reason you want to adopt a new pet (please tick ALL that apply)

Family companion

For my children

Companion for existing pet

Other:

Have you owned a cat before:	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
If YES, have they been desexed & microchipped ... and vaccinated in the last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
If NO, please give reason ...					
<b>YOUR HOME</b>					
Which best describes your living situation? (please tick ALL that apply)					
<input type="checkbox"/> Townhouse / Unit	<input type="checkbox"/> Duplex	<input type="checkbox"/> House <input type="checkbox"/> Farm			
Other:					
Who is the owner of the property where the cat will live?					
<input type="checkbox"/> Myself/my partner	<input type="checkbox"/> Family member	<input type="checkbox"/> Private rental <input type="checkbox"/> Agency rental <input type="checkbox"/> Government Housing			
If you are not the property owner, do you have consent from the home owner to keep pets at the property? <b>You will be required to provide proof of home ownership or written landlord approval prior to this application being processed.</b>					
How many children (under 18) live or regularly stay at your home?					
Age ranges of children:					
Does anyone who resides in the house have any pet allergies?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Please list any pets that live with you now ...					
Dog or Cat	Breed	Age	Male or Female	Desexed Yes / No	How long have you had this pet?
Are existing pets up to date with heartworm, worm & flea control?					<input type="checkbox"/> Yes <input type="checkbox"/> No
Do existing cat/s sleep inside or outside?					
Where will the adopted cat sleep?					
Do you have a regular Vet?					<input type="checkbox"/> Yes <input type="checkbox"/> No
Vet's Name:			Phone No:		

**Once completed, please return this form together with proof of home ownership or landlord approval to the NRAS at 61 Piper Drive, Ballina or PO Box 447**

**OFFICE USE ONLY:**

Entered into "Looking For ..." Database

Volunteer's Initials:

Date:

Additional comments:

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