



Cache Humane Society
2370 West 200 North
Logan, UT 84321
435-792-3920

BARN CAT ADOPTION APPLICATION

Personal Data (Please Print)

Today's Date: _____

Name: _____

Spouse/Roommate Name: _____

Address: _____

Mailing Address: _____ Apt.: _____

City: _____ State: _____ Zip: _____ County: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Household Information

Living Accommodations: House Mobile Home Apt Rent Own

Other (explain) _____

Landlord/Apt Manager Name & Phone Number: _____

If applicable, does your lease allow pets? Yes No Unsure

Do you live here full-time? Yes No

What is the size and description of your property? _____

Describe the structure in which the cat will be housed: _____

How far from the road/traffic is your barn located? _____

Volume of Traffic: Low Medium High Speed Limit: _____

Animal Care Information

Why do you want a barn cat? _____

Barn cats must be securely confined for 3 – 4 weeks. Are you prepared to allow this much time?

Yes No

Who will be responsible for your barn cat's care? _____

Who will care for your barn cats if you are away? _____

Do you agree to trap and take to the vet a barn cat that becomes ill or injured? Yes No

Have you had pets before? Yes No

What happened to the pets you no longer have? _____

Do you have pets of your own at this time? _____

Pet's Name	Breed	Age & Sex	Spay/Neutered (yes/no)	Lives Inside Outside or Both	Where did You get this pet	Years Owned

Please provide name of your small animal vet: _____

If you have a dog is he permitted to run loose? Yes No

If yes, what provision will make to protect the cats? _____

I have read the above information carefully and have completed the application honestly. By signing below, I certify that the information is true. I understand that omission of information or failure to answer all questions honestly can result in this application being denied. Also, if an omission or untruth is discovered after an adoption takes place, I understand that Cache Humane Society reserves the right to annul the adoption and reclaim the animal. I give CHS permission to fully investigate the information provided as well as contact veterinarians and related officials.

Signature

Date