**ADOPTION/FOSTER APPLICATION**

rescue@pupstarzrescue.org / [www.pupstarzrescue.org](http://www.pupstarzrescue.org)

Name of the Cat you are interested in: \_\_\_\_\_\_\_\_\_\_\_

*With this application, we require a copy of your lease or a letter from the landlord stating the building’s pet policy. If you own in a co-op or condo, we require a letter from the Management Company/Board of Pet Policy. Adoption age over 25. Fostering age over 21.*

**Your application will not be processed if there is missing information.**

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| **APPLICANT INFORMATION** |
| Applicant Name: | Personal Email: | Cell Phone: |
| Address:  | Home Phone: |
| City: | State, Zip: | DOB: |
| Occupation (if retired, previous occupation): | Employer Name: |
| Employer Address: | Office Phone: |
| If you have a **spouse**, **parents**, or **roommates**: please fill out the following information below. |
| Name:Email:Phone:Occupation (if retired, previous occupation):Employer:Relation to you:Date of Birth:  | Name:Email:Phone:Occupation (if retired, previous occupation):Employer:Relation to you:Date of Birth: |
| How did you hear about us?I wish to: adopt / foster / volunteer / foster with the option to adopt |
| 1. Have you adopted from another rescue (include name of organization)?
2. What was your experience with the other rescue group? Please provide the name of the person from that group that would recommend you.
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| **VET INFORMATION** |
| Please provide the name and phone number of your current Veterinarian. *(Please let your Vet know that* **PupStarz Rescue** *will be calling and that they are free to speak about your Animals and their veterinary history.)*Veterinarian Name:Address:Telephone Number:*\*If you do not have a current veterinarian, we request that you list your previously used veterinarian.* **If you do not have a veterinarian, please list a veterinarian you are considering to use if you adopted from** **PupStarz Rescue***.* |

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| **FAMILY INFORMATION** |
| Children living in household under the age of 18 (names & ages): |
| Adults living in household over the age of 18 (names & ages): |
| **ANIMAL INFORMATION** |
| For ALL past and present pets, please include the following information: Animal, Breed, Name, Age, Years owned, where the pet came from, where is the pet now/what happened to the pet*Attach an additional page if Animals owned does not fit on this form***Present Pets:****Past Pets:** |
| Are your Animals up to date on vaccines? | Are your Animals spayed/neutered? |
| If not, why? |
| Please describe how much stimulation your new cat would get? (i.e. playtime) |
| Do you rent/own your home?Is the building pet friendly?  | Years at current residence?Do you anticipate moving & when?  |
| **If you rent or own a co-op/condo, we ask that you submit your lease stating the pet policy or obtain a letter from your Landlord/Management company with their official letterhead with following information**: 1. Pet Policy
2. How many Pet’s allowed
3. Size limit (if any)
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| Where do you reside? \_\_\_\_\_House \_\_\_\_\_Condo \_\_\_\_\_Apartment \_\_\_\_\_Co-op \_\_\_\_\_RV/Mobile \_\_\_\_\_Assisted living I: \_\_\_\_\_live alone \_\_\_\_\_live with partner \_\_\_\_\_live with parents or relatives \_\_\_\_\_live with roommates Landlord/Managing Agent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Please note that we will be calling to confirm Pet Policy of your building.)*How many hours a day will this Animal be left alone?Where exactly will the Animal be kept when alone?Where will the Animal sleep at night? If inside, which room?Where will the Animal sleep during the day?Who will be primarily responsible for the pet?How often do you travel?* Will you take your pet with you?
* If not, how do you provide for them while you are away?
* If you have an emergency while you are away, what will happen to this pet?
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| For medical care, feeding, licensing, bedding, and toys – I anticipate spending this amount of money per month\_\_\_\_\_$50 \_\_\_\_\_$100 \_\_\_\_\_$200 \_\_\_\_\_$300 \_\_\_\_\_Other: \_\_\_\_\_\_\_\_\_\_If your pet should become injured or ill, what would you do? What would you do if treatment were expensive?  |
| Have any of your family members, including yourself had a history of allergies or asthma?  |
| What will you do if the new pet does not get along with present pets? |
| Have you ever turned an Animal over to a rescue group/shelter?If yes, please explain in detail:  |
| ***Please explain in detail*** why you want to foster/adopt/volunteer? |
| What training methods are you aware of and utilize?  |
| Please describe what you would do if your new cat peed in the home:  |
| Describe your ideal Animal companion (please include personality traits):   |
| Age, sex, weight desired:  |
| **Please provide three references, *not related* to you. Email addresses must be included**  |
| Name: | Email:  | Phone: |
| Relation to you: | Years known: |
| Name: | Email:  | Phone: |
| Relation to you: | Years Known: |
| Name: | Email:  | Phone: |
| Relation to you: | Years known:  |
| \*Please inform your references that a representative of **PupStarz Rescue** will be in touch**.** **Applications will not be processed if references cannot be contacted.** |

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| **If you should become ill, disabled, or if you should die, who will take care of your pet?**Name: Address: Email address: Phone Number:Relationship to adopter:Are there ANY companion Animals currently living in THEIR household: (Breed, Age, Sex, Altered) |

**PUPSTARZ RESCUE ADOPTION CONTRACT**

www.pupstarzrescue.org **|** rescue@pupstarzrescue.org

Full Name of Adopter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Adopter(s) must initial at the end of each section below.**

**For valuable consideration, the receipt and adequacy of which are hereby acknowledged, the undersigned agree as follows:**

1. PupStarz Rescue, Inc. has the right to inspect the animal(s)’ new home before and after adoption, as deemed necessary by the organization. If the home is deemed unsuitable by PupStarz Rescue, Inc., or for any other reason grounded in concern for the welfare of the animal, within the sole discretion of PupStarz Rescue, PupStarz Rescue, Inc., and the agents thereof expressly reserve and retain the absolute right to refuse the adoption or remove the animal from the adopted home placement. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
2. Animals must be kept in a safe, indoor area. Animals cannot be chained or permitted to roam outdoors unsupervised. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
3. All animals adopted through PupStarz Rescue must be spayed or neutered. If this has not been done at the time of adoption, it must be done within three months of adoption. This service is included in the adoption fee. If not completed by 30 days post adoption, PupStarz Rescue will have the absolute right to take possession of the animal. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
4. Appropriate vaccinations must be maintained and adequate medical care must be provided by the adopter throughout the animal’s lifetime. If PupStarz Rescue should become aware pets are not properly vetted, we have the absolute right to remove the pet from the adopted home. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
5. If at any time, Adopter can no longer keep an animal adopted from PupStarz Rescue, or provide appropriate care for the animal, Adopter must return the animal to PupStarz Rescue. Do not place the animal in another home yourself or surrender the animal to any animal shelter or rescue. You must notify PupStarz Rescue immediately to arrange for the safe return of the animal. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
6. The adoption fee is non-refundable under any circumstances, including if the Animal is returned or reclaimed for any reason**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
7. The Animal will not be trained, encouraged, nor misrepresented for the purpose of protection, aggression, or any aggravated display of behavior. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
8. The Animal will receive proper grooming, including but not limited to removing hair from ears if applicable, eye and ear care, and regular brushing of teeth, baths, nail clipping and haircuts. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
9. The Adopter will provide a humane environment, regular exercise and companionship for the Animal. The Animal will have appropriate food, fresh water, indoor shelter at all times, and medical care for the duration of its life. The Animal will be treated as a member of the family. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
10. Should the Animal need behavior training and/or expert advice, the Adopter agrees to work with the Animal to modify behaviors as follows: aggression, biting, scratching, barking, mounting, digging, marking, and housetraining without the use of negative reinforcement or other harmful methods. PupStarz Rescue cannot be held accountable for these behavior patterns, and Adopter acknowledges that some of such behaviors may never be eradicated.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**

1. PupStarz Rescue makes no express or implied warranty, representation or promise to the age, weight, health, breed, habits, disposition or safety of the Animal. Adopter hereby accepts the Animal “as is”, assume all risks and responsibilities associated with the ownership of the Animal, including known or unknown medical issues, proclivities, bites, and hereby fully and completely releases, indemnifies and holds harmless the PupStarz Rescue, its directors, officers, volunteers, and agents, from any claim, cause of action or liability of any sort or nature, whether known or unknown, directly or indirectly arising out of or in connection with the adoption, care, ownership, maintenance, temperament or condition of the Animal. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
2. If euthanasia becomes necessary, it is agreed the Animal will not be turned over to a humane society or animal shelter for this service. PupStarz Rescue is to be notified before euthanasia if it becomes necessary.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**

1. In the event the Animal is lost or stolen, Adopter shall provide PupStarz Rescue with prompt notice of same including specific details. PupStarz Rescue reserves the right to reclaim the Animal. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
2. The Adopter will abide by all local animal ordinances, as well as applicable leases and restrictions, including property ownership agreements as they pertain to the legally defined number of pets allowed in any human domicile or associated/attached properties (“Requirements”). Adopter further agrees that, should he/she be in violation of any Requirements, Adopter shall indemnify, defend and hold harmless PupStarz Rescue, and all associated rescue organizations, their directors, officers, volunteers and agents in all matters, and assumes all legal and/or financial liabilities pertaining to any violations of said Requirements. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
3. If Adopter fails to comply with the above provisions, Adopter agrees, upon notification, to return the Animal(s) to PupStarz Rescue and to pay any legal costs associated incurred by PupStarz Rescue in connection with the enforcement of this Contract. Adopter will be responsible for any boarding fees, veterinary care, and training incurred by PupStarz Rescue in readopting the Animal. I agree to sign over the microchip information to PupStarz Rescue. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
4. Cats are prohibited from being declawed. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
5. It is understood that any additional information provided on the PupStarz Rescue Adoption Application will become a binding part of this Contract as well, incorporated herein by reference. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
6. By signing this Contract, Adopter acknowledges that the above terms have been fully explained and that Adopter completely understands and agrees to the above terms. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**
7. Electronically transmitted signatures on this Contract shall be deemed the equivalent of original signatures in all respects. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Adopter(s)**

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Signature of the Adopter Date

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Signature of the Adopter Date

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Agent of PupStarz Rescue, Inc. Date

For Internal Use Only:

Date of Adoption: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pet Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pet Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Color: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spayed/Neutered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_