



**BOND COUNTY HUMANE SOCIETY  
CAT ADOPTION PROFILE**

2510 S. Elm St.  
Greenville, IL 62246  
618-664-4068

**Cat Name or Description of cat you are interested in adopting:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This adoption profile will help determine if the adoption is in the best interest of the pet and the adopter. All applications are subject to approval by Bond County Humane Society. Please note adoption fees are non-refundable unless approved by a BCHS Officer. The minimum age for adopters is 21 years of age.**

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

City/State/Zip: \_\_\_\_\_ Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Military Veteran with valid IL Identification Card? \_\_\_\_\_

Do you rent or own? \_\_\_ Single Family, Apt, Condo, Townhouse, Mobile Home, Military Housing?

If you rent, please provide your Landlord's name & number: \_\_\_\_\_

How long have you lived at your residence? \_\_\_\_\_

If less than 1 year, please state how long at previous address: \_\_\_\_\_

How many adults in household? \_\_\_ How many children? \_\_\_ Children ages & gender: \_\_\_\_\_

Is this pet for you and your immediate family living in the same household? \_\_\_\_\_

Do any family members suffer from allergies? \_\_\_ If yes, please describe \_\_\_\_\_

How would you describe your family's lifestyle? Very Active Moderately Active Slightly Active

Are all family members in agreement about adopting a pet? \_\_\_\_\_

Who will be the primary caregiver for the pet? \_\_\_\_\_

Do you currently have any pets? \_\_\_ If yes, please list below.

**Please list all the animals you have owned in the past 5 years, including deceased, lost, or re-homed:**

Name/Age				
Breed				
Gender/Altered				
Do you still own?				
If you no longer own the animal where are they now? <i>Please explain in detail.</i>				
Provide description of pet's temperament.				

Do you have a regular Veterinarian? \_\_\_\_\_

**NOTE: If you currently own a pet or have owned one in the last 5 years, a veterinarian reference is required to process your application. If a vet reference is not supplied, please explain.**

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

Phone: \_\_\_\_\_ How long have you been with this vet? \_\_\_\_\_

The reason I cannot supply a vet reference is: \_\_\_\_\_

**Do we have permission to contact the veterinarian identified to obtain your current or past animal(s) vaccination, flea and heartworm prevention history? \_\_\_\_\_.**

Have you owned a pet longer than 5 years ago? \_\_\_\_ If yes, please describe your previous experience.

Why do you want to adopt a cat? \_\_\_\_\_

Have you ever had a kitten? How long ago? \_\_\_\_\_

What would you do if this cat(s) doesn't get along with your current pets? \_\_\_\_\_

On average how many hours will the cat(s) spend alone each day? 0-2 3-5 6-8 9+

Where will the cat(s) be kept when you are not home? Outside / Crate / Free Roam in House / Other

What type of sleeping arrangements will you provide for your cat(s)? Bed / Crate / Other

How will you correct or reprimand your cat? Physical / Verbal / Other

What reasons would cause you to not be able to keep the cat?

Do you agree to license this pet and give it regular health care for the life of the pet? \_\_\_\_\_

Do you agree to contact Bond County Humane Society if you decide not to keep this pet for any reason?  
\_\_\_\_\_

Do you agree to abide by all applicable state, county, and municipal laws applicable to animals and their care? \_\_\_\_\_

Have you applied with any other shelter or rescue within the past year? \_\_\_\_ If so, what was the result?  
\_\_\_\_\_

The information on this application will be kept confidential. I certify that all the information provided above is complete and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**For BCHS Use Only**

Vet Check: \_\_\_\_\_ Date: \_\_\_\_\_ Notes: \_\_\_\_\_

Landlord Check: \_\_\_\_\_ Date: \_\_\_\_\_ Notes: \_\_\_\_\_