

Full Name: I am 18 years or older: YES ☐ NO ☐Address and Postal Code: Phone Number: Email: Have you adopted from the Ontario SPCA in the past? YES ☐ NO ☐How would you describe your living environment? I.e. A townhouse

How would you describe the energy level of your home?

Busy, with lots of activity ☐ Both busy and quiet ☐ Quiet, with little activity ☐**This cat will be living with:**Adults: ☐ Children: ☐ Dogs ☐ Birds ☐Seniors: ☐ Teenagers: ☐ Other Cats ☐ Small Mammals ☐If other cats are in the home, are they spayed/Neutered? YES ☐ NO ☐**Who will be the primary caregiver for this cat?** **These characteristics are important to me:**Male ☐ Long Coat ☐ Kitten ☐ Senior (8+ years) ☐Female ☐ Medium Coat ☐ Young Adult ☐ No Preference ☐Short Coat ☐ Adult ☐ Other: ☐ **Personality:**Good with kids ☐ Enjoys being held ☐ Independent ☐ Indoor only ☐Good with dogs ☐ Playful ☐ Adventurous ☐ Indoor/outdoor ☐Good with cats ☐ Quiet/Calm ☐ Good with visitors ☐ Outdoor only ☐Other ☐ **What sort of enrichment activities do you plan to offer your new cat?**Toys ☐ Scratching Post ☐ Brushing/Petting ☐ Other animals ☐ Playtime ☐Other: ☐ **I have questions about:**Litterbox issues ☐ Cat to cat intro ☐ Veterinary Care ☐ Indoor Enrichment ☐Cat to dog intro ☐ Talkative Cats ☐ Daily Care/Diet ☐ Grooming ☐Other: ☐ I would be open to discussing the adoption of a cat that requires medical support. ☐I would be open to discussing the adoption of a cat that requires behavioural support. ☐Adopter Signature: Date: Ontario SPCA Staff: Date: **Thank you for choosing the Ontario SPCA and Humane Society!**