

Fort Erie SPCA  
CRITTER/BIRD ADOPTION Application Form  
(Rabbits, Rats, Guinea Pigs etc)  
Please email to info@forteriespca.ca

Date: \_\_\_\_\_

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

Time: \_\_\_\_\_

Pet Identification Number: \_\_\_\_\_

Thank you for your interest in adopting a Cat. Our Adoption Applicants are screened for suitability and compatibility as well as criteria related to care and commitment. We take the time to carefully read each and every application; only applications that align with the cats lifestyle, physical and medical needs will be contacted. If we find your application aligns well with the cat you have applied for we will contact you within a couple of days to further the adoption process. We reserve the right to deny an Adoption Applicant.

Are you adopting this animal for yourself? (if other, please explain):

\_\_\_\_\_  
Are you 18 or older? Yes    No

List all members of your household including the number of children and their ages and who will be primarily responsible for this pet?

\_\_\_\_\_  
Do you own your home? Yes    No

Do you rent? Yes    No

If "Yes" please give your landlords name and contact information:

\_\_\_\_\_  
Have you ever adopted from a shelter? Yes    No

If "Yes" please specify which one:

\_\_\_\_\_  
Do you currently have a dog? Yes    No

Do you currently have a cat? Yes    No

Please list any other animals you currently own:

\_\_\_\_\_  
8. Have ever had to surrender your pet? Yes    No

If "Yes" for what reason and what shelter?

\_\_\_\_\_  
May we contact your Veterinarian for past pet history? Yes    No

Veterinarian Name and Contact Information\_\_\_\_\_

Are your pets vaccinated every year?   Yes   No

Do you have experience with this breed of animal?   Yes   No

Are you ready to be committed to your pet for at least 10 years (if applicable)?   Yes   No

Please briefly explain why you'd be the perfect fit for this animal:

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Are you aware of the costs involved in pet ownership?   Yes   No

Are you aware of the Animal By-Laws in the Town of Fort Erie or in your City/Town?   Yes   No

Please list two (2) pet references with phone numbers other than immediate family:

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Name:\_\_\_\_\_      Telephone Number:\_\_\_\_\_

Street:\_\_\_\_\_      City:\_\_\_\_\_

Postal Code:\_\_\_\_\_      E-mail:\_\_\_\_\_

I Declare this Information to be correct.      Signed X\_\_\_\_\_

Thank you for your continued Interest and Support. We are a dedicated Not-for-Profit Organization  
committed to the Health, Welfare and Care of All Animals