

**DO NOT FILL IN THIS AREA  
MUCH LOVE ADMINISTRATION ONLY**

|                                       |
|---------------------------------------|
| MUCH LOVE REPS _____ / _____          |
| DATE OF APPLICATION _____             |
| DATE OF HOME CHECK _____              |
| DATE ADOPTION FEE PAID _____          |
| DATE INFO ENTERED INTO DATABASE _____ |
| A    B    C    D                      |

# TCB application

## Welcome to the Much Love Animal Rescue program.

We are glad you would like to adopt a new pet from us. The following information is required so that we can assist you in the selection of your new pet. This form and consultation with a Much Love representative is designed to help us determine if the adoption is in the animal's best interest, and to assist you in finding the animal most compatible with your lifestyle.

**THERE IS A \$125.00 ADOPTION FEE FOR CATS, \$175.00 ADOPTION FEE FOR KITTENS.**

This helps us cover the spay/neuter of your new pet, current shots, microchipping and temporary boarding of the animal. A homecheck will be required. A binding contract will be required to adopt the animal.

NAME OF CAT \_\_\_\_\_ COLOR \_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_

NAME OF 2ND CHOICE CAT \_\_\_\_\_ NAME OF 3RD CHOICE CAT \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_ D.O.B. \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

WHAT IS YOUR OCCUPATION? \_\_\_\_\_ HOW LONG AT CURRENT JOB? \_\_\_\_\_

EMPLOYER \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

PERSONAL REFERENCE #1 NAME & TELEPHONE \_\_\_\_\_

PERSONAL REFERENCE #2 NAME & TELEPHONE \_\_\_\_\_

WHO SHARES YOUR HOUSEHOLD?     SPOUSE     SIGNIFICANT OTHER     ROOMMATE     LIVE ALONE

CHILDREN - THEIR AGES \_\_\_\_\_  OTHER \_\_\_\_\_

IF YOUR PRESENT RELATIONSHIP WERE TO CHANGE, WITH WHOM WOULD THE CAT REMAIN? \_\_\_\_\_

PLEASE EXPLAIN \_\_\_\_\_

AT WHAT AGE DO YOU THINK CHILDREN ARE RESPONSIBLE ENOUGH TO TAKE CARE OF A CAT WITHOUT ASSISTANCE?  
(I.E. WALK, FEED, ETC.) \_\_\_\_\_

WOULD THIS BE YOUR FIRST PET? \_\_\_\_\_

WHAT KIND OF PETS HAVE YOU HAD IN THE PAST? \_\_\_\_\_

WHICH DO YOU STILL HAVE? \_\_\_\_\_ ARE THEY SPAYED/NEUTERED? \_\_\_\_\_

WHAT HAPPENED TO THE PETS YOU NO LONGER HAVE? \_\_\_\_\_

IF THEY ARE NO LONGER LIVING, HOW DID THEY DIE? \_\_\_\_\_

**In order to be considered as an adopter you must:**

Be 25 years of age or older.

Have identification showing your present address.

If renting, have the knowledge and consent of your landlord.

Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care of the pet.

Completion of this application does not guarantee adoption of a Much Love animal.



P.O. Box 341721 Los Angeles, CA 90034

to contact us email: [info@muchlove.org](mailto:info@muchlove.org)

visit [www.muchlove.org](http://www.muchlove.org) to view our pets

**over** ➡

# cat application

WHAT BEHAVIOR ARE YOU LOOKING FOR IN A PET? \_\_\_\_\_

IF YOU DO HAVE PETS, HOW DO YOU FEEL THEY WILL ADJUST TO A NEW ANIMAL? \_\_\_\_\_

IF YOU ALREADY HAVE A CAT, WHAT PERCENTAGE OF THE TIME IS THE CAT OUTDOORS? \_\_\_\_\_

WHY DO YOU WANT THIS ANIMAL?  COMPANION  COMPANION FOR ANOTHER PET  HOUSE PET  MOUSER

DOES ANYONE IN YOUR FAMILY HAVE ALLERGIES TO ANIMALS? \_\_\_\_\_

ARE YOU PLANNING ON MOVING IN THE NEXT 12 MONTHS? \_\_\_\_\_ IF SO, WHERE? \_\_\_\_\_

WHICH DO YOU LIVE IN? (CHECK ONE)  HOUSE  APARTMENT  CONDO  OTHER \_\_\_\_\_

DO YOU OWN OR RENT? \_\_\_\_\_ IF RENTING, DO YOU HAVE PERMISSION TO HAVE ANIMALS? \_\_\_\_\_

YOUR LANDLORD'S NAME AND TELEPHONE NUMBER \_\_\_\_\_

DO ALL OF YOUR WINDOWS HAVE SCREENS AND ARE THEY IN GOOD CONDITION? \_\_\_\_\_

IS SOMEONE HOME DURING THE DAY? \_\_\_\_\_ WHO? \_\_\_\_\_

WHAT PERCENTAGE OF TIME WILL THE CAT BE OUTDOORS, AND WHY? \_\_\_\_\_

WHAT PERCENTAGE OF TIME WILL THE CAT BE INDOORS, AND WHY? \_\_\_\_\_

DO YOU HAVE ANY POISONS (RAT/MOUSE, SNAIL BAIT)? \_\_\_\_\_

WHERE WILL THE CAT BE KEPT DURING THE DAY? \_\_\_\_\_ AT NIGHT? \_\_\_\_\_

WHICH ROOMS, IF ANY, ARE OFF LIMITS TO CATS? \_\_\_\_\_ WILL THE CAT BE ALLOWED ON THE FURNITURE? \_\_\_\_\_

SPECIFICALLY, WHERE WILL THE LITTER BOX BE PLACED? \_\_\_\_\_

HAVE YOU EVER BRED A CAT? \_\_\_\_\_ IF YES, WHY? \_\_\_\_\_

DO YOU PLAN ON DECLAWING THIS CAT? \_\_\_\_\_ HAVE YOU DECLAWED A CAT BEFORE? \_\_\_\_\_

IF THE CAT CLAWED THE FURNITURE, WHAT WOULD YOU DO? \_\_\_\_\_

DO YOU PLAN ON TAKING YOUR CAT TO A VETERINARIAN FOR ANNUAL EXAMS? \_\_\_\_\_ IF NO, WHY? \_\_\_\_\_

WHO IS YOUR VETERINARIAN? \_\_\_\_\_

ARE YOU PREPARED TO COVER ANY VET EXPENSES YOUR PET MAY INCUR THROUGHOUT IT'S LIFE? \_\_\_\_\_

IS THERE A LIMIT? \_\_\_\_\_ HOW MUCH IS TOO MUCH? \_\_\_\_\_

WOULD YOU CONSIDER EUTHANIZING YOUR PET FOR MEDICAL COSTS? \_\_\_\_\_

WHAT DO YOU THINK IS THE BEST WAY TO KEEP YOUR ANIMAL'S TEETH CLEAN?  CLEAN THEM MYSELF  NEVER THOUGHT ABOUT IT

HAVE A PROFESSIONAL CLEAN THEM  IT'S NOT NECESSARY

WHICH OF THE FOLLOWING WOULD YOU USE FOR FLEA CONTROL?  FLEA SPRAY  FLEA BATH  FLEA COLLAR  HERBAL FLEA COLLAR

FLEA BUSTERS  FLEA COMB  PROGRAM, ADVANTAGE, OR FRONTLINE

WHEN YOU GO ON VACATION, WHO WILL CARE FOR THE CAT?  HOUSE SITTER  VETERINARIAN  KENNEL  FRIEND'S HOUSE

FRIEND COMES BY BUT DOESN'T STAY  OTHER \_\_\_\_\_

WILL YOU FEED YOUR CAT DRY OR CANNED FOOD? \_\_\_\_\_ HOW MANY TIMES A DAY? \_\_\_\_\_

WHO WILL BE RESPONSIBLE FOR FEEDING THE CAT? \_\_\_\_\_



# cat application

WHICH OF THE FOLLOWING WOULD FORCE YOU TO GIVE UP YOUR CAT?  DIVORCE/SEPARATION  MOVE OUT OF STATE  BIG VET BILLS

MOVE WHERE PETS AREN'T ALLOWED  CAT MEOWS A LOT  CAT HISSES AT STRANGERS  CAT BITES OR SCRATCHES CHILDREN

MARRY SOMEONE WITH ALLERGIES  CAT LOSES CONTROL OF BLADDER  CAT DEVELOPS CHRONIC ILLNESS  CAT IS UNTRAINABLE

NOT THE KIND OF CAT I THOUGHT IT WOULD BE  PLANNING ON HAVING A BABY  CAT DOESN'T GET ALONG WITH CURRENT PET

CAT CLAWS FURNITURE  DOES NOT APPLY

WHAT SORT OF BEHAVIORAL MODIFICATIONS DO YOU THINK WILL BE NEEDED FOR THIS ANIMAL? \_\_\_\_\_

\_\_\_\_\_

WHAT IS A BEHAVIOR THAT WOULD NOT BE ACCEPTABLE TO YOU? \_\_\_\_\_

\_\_\_\_\_

WHAT DISCIPLINE WILL YOU USE IF YOUR CAT CLAWS THE FURNITURE?  SWAT NOSE  SPANK WITH HAND  SPANK WITH NEWSPAPER

STERN VOICE  SCRUFFING  OTHER \_\_\_\_\_

IF YOU BECOME ILL OR DIE, WHAT PLANS WILL YOU MAKE FOR YOUR PET? \_\_\_\_\_

\_\_\_\_\_

ARE YOU WILLING TO HAVE A MUCH LOVE REPRESENTATIVE COME TO YOUR HOME? \_\_\_\_\_ IF NOT, WHY? \_\_\_\_\_

HOW DID YOU HEAR ABOUT MUCH LOVE ANIMAL RESCUE? \_\_\_\_\_

HAVE YOU TRIED TO ADOPT AN ANIMAL FROM MUCH LOVE IN THE PAST? \_\_\_\_\_

HAVE YOU TRIED TO ADOPT AN ANIMAL FROM ANOTHER RESCUE? \_\_\_\_\_

IF SO, WHAT HAPPENED? \_\_\_\_\_

COMMENTS ABOUT WHY YOU WOULD LIKE TO ADOPT THIS CAT \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I UNDERSTAND THAT FILLING OUT THIS APPLICATION DOES NOT GUARANTEE THE ADOPTION OF A MUCH LOVE ANIMAL. I AGREE THAT ALL OF THE ABOVE INFORMATION IS HONEST AND TRUE.

\_\_\_\_\_

**SIGNATURE**

COMMENTS OF MUCH LOVE REPRESENTATIVE \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SIGNATURE OF MUCH LOVE REPRESENTATIVE**