



Thank you for your interest in adopting a rescue feline instead of supporting irresponsible breeders and pet shops. The document must be completed in black ink and all pages of this contract must be initialled and the last page must be signed and dated. Once completed, please return the contract to [cattery@luckylucy.org](mailto:cattery@luckylucy.org).

**ADOPTION TERMS AND CONDITIONS**

|    |  |
|----|--|
| 1. | In order to be considered for an adoption, you must: <ul style="list-style-type: none"> <li>• Be at least 18 years of age,</li> <li>• Have the knowledge and consent of all other parties staying in the same household you want to adopt the cat/kitten to.</li> <li>• Have the necessary consent of a landlord if you are renting.</li> <li>• Be self-sufficient and have the financial means to support the animal in terms of feeding and medical expenses.</li> </ul> |
| 2. | <b>Animals cannot be adopted as gifts for family members, friends or children.</b> Parents will have to be primary care takers until such time as a child is able to responsibly care for the animal.  |
| 3. | We will only consider the adoption of kittens and juveniles between the ages of 0 – 12 months to persons not older than 55 years of age.   |
| 4. | The Lucky Lucy Foundation reserve the right at any time during the adoption process to decline an application, without explanation.  |
| 5. | All adoption applications are subject to a home check performed by a person appointed by the Lucky Lucy Foundation.  |
| 6. | <b>Young kittens have low immunity, and the stress of joining a new home can sometimes lead to snuffles, diarrhoea, or other symptoms. Do you agree to take your new kitten to the vet as soon as possible, should any of these symptoms affect its health?</b>  |
| 7. | <b>Disclaimer:</b> Whilst every effort is made to ensure that all cats and kittens adopted out have tested negative for FEL-V and FIV we cannot be held responsible for the virus that is in the incubation period of 60 – 90 days. All cats that have been with us for longer than 90 days are retested to ensure their status.   |

**FELINE APPLICATION FOR** *(please complete the name(s))*

|                                |  |                                     |  |
|--------------------------------|--|-------------------------------------|--|
| <b>CAT</b> (1 year and older)  |  | <b>KITTEN</b> (1 month – 12 months) |  |
| <b>SPECIAL NEEDS</b> (any age) |  | <b>RETIREE</b> (7 years and older)  |  |

**PERSONAL INFORMATION**

| Applicant Information   |  | Spouse/Partner Information (compulsory) |  |
|-------------------------|--|---|--|
| Full Name & Surname     |  | Full Name & Surname                     |  |
| Identity Number         |  | Identity Number                         |  |
| Email Address           |  | Email Address                           |  |
| Cell Number             |  | Cell Number                             |  |
| Home Tel nr             |  | Relationship                            |  |
| Home Address (Physical) |  |   |  |

### EMPLOYMENT INFORMATION FOR THE APPLICANT

|                  |  |               |  |
|------------------|--|---------------|--|
| Employer         |  | Occupation    |  |
| Working Hours    |  | Office Tel Nr |  |
| Business Address |  | Email Address |  |
|                  |  |               |  |

### RESIDENCE / ACCOMMODATION INFORMATION

|  |  |   |   |
|--|--|---|---|
| Residence Type<br><i>(*Please mark ALL the appropriate block(s))</i>                     | Freestanding House <input type="checkbox"/> House in a Security Complex <input type="checkbox"/> Apartment <input type="checkbox"/> Duplex <input type="checkbox"/> Small Holding <input type="checkbox"/> Living with parents <input type="checkbox"/> Rented Property <input type="checkbox"/> Own Property <input type="checkbox"/> |   |   |
| In the case of a rented property do you have permission to keep animals on the property? | YES <input type="checkbox"/> NO <input type="checkbox"/>   | Do you have a pool/ large pond and is it covered or open? | YES <input type="checkbox"/> NO <input type="checkbox"/><br>Covered <input type="checkbox"/> Open <input type="checkbox"/> Fenced <input type="checkbox"/>  |
| Is your property/complex fenced?   | YES <input type="checkbox"/> NO <input type="checkbox"/>   | Type of Fencing?  | Vibracrete <input type="checkbox"/> Steel <input type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/><br>Mix <input type="checkbox"/> Other <input type="checkbox"/> |
| Is the property close to a main road?  | YES <input type="checkbox"/> NO <input type="checkbox"/>   | What is the size of your property?                        | No Yard <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/><br>More than 1 Hectare <input type="checkbox"/>                    |
| Is the volume of traffic in your street?   | Heavy <input type="checkbox"/> Light <input type="checkbox"/><br>Moderate <input type="checkbox"/>   | The noise/activity level in your home is usually?         | High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>  |

### FAMILY MEMBERS and OTHER MEMBERS CURRENTLY LIVING WITH YOU

| Do you have Children? | YES <input type="checkbox"/> NO <input type="checkbox"/> | Other Family members or housemates currently living with you? | YES <input type="checkbox"/> NO <input type="checkbox"/> |     |                 |
|-----------------------|--|---|--|-----|-----------------|
| Name                  | Age  | Known Allergies   | Name   | Age | Known Allergies |
|                       |  |   |  |     |                 |
|                       |  |   |  |     |                 |
|                       |  |   |  |     |                 |
|                       |  |   |  |     |                 |

### INFORMATION ABOUT YOUR CURRENT PETS IN THE HOUSEHOLD

| Name | Age | Type of Animal<br><i>(Dog/Cat/Bird etc)</i> | Breed | Sterilised<br>Yes / No                                   | Time in your<br>Care | Vaccinations up to<br>date<br>Yes / No                   |
|------|-----|---|-------|--|----------------------|--|
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |

Initials:

| Name | Age | Type of Animal<br>(Dog/Cat/Bird<br>etc) | Breed | Sterilised<br>Yes / No                                   | Time in<br>your Care | Vaccinations up to<br>date<br>Yes / No                   |
|------|-----|---|-------|--|----------------------|--|
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|      |     |   |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |                      | YES <input type="checkbox"/> NO <input type="checkbox"/> |

### MORE INFORMATION ABOUT YOUR CURRENT PETS IN THE HOUSEHOLD

|   |   |  |  |
|---|---|--|--|
| Where do your pets stay when you go on holiday?                                 | Cattery <input type="checkbox"/> Friends or Family @ Home <input type="checkbox"/> Get a Petsitter <input type="checkbox"/> Take them with <input type="checkbox"/> |  |  |
| Have you ever <b>surrendered</b> any of your pets to a shelter (past 10 years)? | YES <input type="checkbox"/> NO <input type="checkbox"/>  | Have you ever <b>rehomed</b> any of your pets (past 10 years)? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| If so, please give short details.   |   | If so, please give short details.                              |  |
| Have any of your pets got <b>lost</b> recently (past 24 months)?                | YES <input type="checkbox"/> NO <input type="checkbox"/>  | Have any of your pets died recently (past 12 month)?           | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| If so, please give short details.   |   | If so, please give short details.                              |  |

### YOUR VETERINARIAN'S INFORMATION

|               |                             |
|---------------|-----------------------------|
| Practice Name | Business Tel nr             |
| Vet's Name    | Business Address (Physical) |

### INFORMATION NEEDED FOR THE NEW ADOPTION PROCESS?

|   |   |                                |
|---|---|--------------------------------|
| Have you ever had an adoption application rejected by another organisation?                                       | YES <input type="checkbox"/> NO <input type="checkbox"/>  | If so, please provide details. |
| What temperament and activity level you are looking for in a cat/kitten companion( <i>check all that apply</i> ): | High Energy <input type="checkbox"/> Lap Cat <input type="checkbox"/> Mellow <input type="checkbox"/><br>Affectionate <input type="checkbox"/> Quiet <input type="checkbox"/> Does not matter <input type="checkbox"/>  |                                |
| Why would you like to adopt a cat/kitten?   |   |                                |
| What food will your cat/kitten be eating?   | Friskies <input type="checkbox"/> Whiskas <input type="checkbox"/> Catmor <input type="checkbox"/> Hills <input type="checkbox"/> Royal Canin <input type="checkbox"/> Eukanuba <input type="checkbox"/> Iams <input type="checkbox"/><br>RAW <input type="checkbox"/> Acana <input type="checkbox"/> Orijen <input type="checkbox"/> Other <input type="checkbox"/> Please give more details : ..... |                                |

Initials:

|  |   |   |  |
|--|---|---|--|
| Where will your cat / kitten stay / sleep? | Only Inside <input type="checkbox"/> Only Outside <input type="checkbox"/><br>Outside & Inside <input type="checkbox"/> | On average how long will your new cat/ kitten be left alone during the day? | Between 0-5 hours a day <input type="checkbox"/><br>Between 5-10 hours a day <input type="checkbox"/><br>Longer than 10 hours a day <input type="checkbox"/> |
|--|---|---|--|

### INFORMATION NEEDED FOR THE NEW ADOPTION PROCESS

|  |  |                                   |  |
|--|--|-----------------------------------|--|
| Would you be able to provide a scratch pole for your cat/kitten?   | YES <input type="checkbox"/> NO <input type="checkbox"/>   | Have you ever had a cat declawed? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I prefer a cat/kitten that :<br><i>(check all that apply)</i>  | Loves children and strangers <input type="checkbox"/> Can tolerate children and strangers <input type="checkbox"/><br>Loves other animals <input type="checkbox"/> Can tolerate all other animals <input type="checkbox"/> Loves birds <input type="checkbox"/><br>I don't care if he/she gets along with other animals, children or strangers <input type="checkbox"/>  |                                   |  |
| List the type of behavioural problems you consider not acceptable (meaning you wouldn't be willing to work on) to keep the cat/kitten? | Scratching my furniture or rugs <input type="checkbox"/> Litter box avoidance <input type="checkbox"/><br>Aggression towards people <input type="checkbox"/> Urine Marking <input type="checkbox"/><br>Aggression towards other animals in the household <input type="checkbox"/><br>Fear <input type="checkbox"/> Stress <input type="checkbox"/> Cats that scratch you <input type="checkbox"/><br>Cats that wake you up at night or too early to play <input type="checkbox"/><br>NONE <input type="checkbox"/> |                                   |  |

### SURVEY (Thank you for your time)

|   |   |
|---|---|
| Do you want to subscribe to our Newsletter?         | Already subscribed <input type="checkbox"/> YES, please <input type="checkbox"/> NO, thank you <input type="checkbox"/>   |
| Where did you hear about the Lucky Lucy Foundation? | Facebook <input type="checkbox"/> Internet (WEB) <input type="checkbox"/> Networking through email <input type="checkbox"/><br>From a Friend/Family/Colleague <input type="checkbox"/><br>Other <input type="checkbox"/> Please give more detail : _____<br>_____ |

### DECLARATION

|   |  |
|---|--|
| I hereby declare that all the information provided in this contract is true to the best of my knowledge and belief.   | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| In the case where any of my current pets are not sterilised, I hereby agree to sterilise them <b>prior</b> to accepting the new cat/kitten into my home.  | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I agree to pay the adoption fee of <b>R650 or as determined by LLF</b> either up front or upon collection of my new cat/kitten. I also agree to the condition that the adoption fee is non-refundable and that it will be considered as a donation to LLF upon return of my newly adopted animal. | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I agree that the Lucky Lucy Foundation can provide my newly adopted cat with a microchip which will be registered in the name of the Foundation.  | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I agree to inform the Lucky Lucy Foundation within 7 working days in case any of my contact details (including physical address) should change.   | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I hereby declare that I will not use the animal in any illegal activities.  | YES <input type="checkbox"/> NO <input type="checkbox"/> |

**DECLARATION (continue)**

|   |  |
|---|--|
| I hereby agree that if I ever need to relinquish the animal during its life, that I will contact the Lucky Lucy Foundation for its surrender. I hereby declare that I will never sell, give the animal away or hand it down to another family member or individual or any other welfare organisation (including the SPCA and AACL). | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I hereby agree that I will be responsible for ALL medical expenses, which include emergencies, routine procedures, annual check-ups, vaccinations, and all other medical expenses that might occur.   | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I hereby agree to allow the Lucky Lucy Foundation permission to do unannounced follow-up home checks for the lifetime of the adopted animal.  | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I agree that the Lucky Lucy Foundation has the right to confiscate any adopted animal at any time without approval and at his or her own discretion, should matters arise that contradict the agreement of the adoption contract.   | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| I agree that this document is considered a legally binding contract between the Lucky Lucy Foundation and myself.   | YES <input type="checkbox"/> NO <input type="checkbox"/> |

Signed on this \_\_\_\_\_ day of \_\_\_\_\_ **2019** at \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

*\*Please ensure that all pages of this Adoption Contract are initialled and the last page signed.*

**Electronic Funds Transfer Information or Cash when fetching your new friend:**

The Lucky Lucy Foundation  
Standard Bank Cape Gate  
Branch Code: 023910  
Cheque account  
410514039  
Ref : (Kitty Name)/Your Name

Initials: