Email Application To: tinypawskittenadoptions@gmail.com OR Text Application Picture: 405-612-0071

Kitten Of Interest

Approved \_\_\_\_ Denied \_\_\_\_ Reason \_\_\_\_\_



Tiny Paws Kitten Rescue 901 S. Lowry, Stillwater, OK 74074 405-612-0071

	PRE-ADOPTION APPLICATION
PLEASE COMPLETE	LEGIBLY FOR CONSIDERATION

PAY ONLY AFTER APPROVAL NOTIFICATION
\_\_\_\_\_\$65 Pre-Adoption Fee Paid

\_\_\_\_\_ Int \_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_

\_\_ Cash \_\_ Check \_\_\_ PayPal \_\_ Square

Name:			Em	ıail:			
			Alternate Phone:				
Address Where	Kitten Will Live:						
City:				State:	Zipcode: _		
If You DO NOT OWN	Your Residence: Prop Ov	vner/Manager:			Phone:		
List All Pets AT	ΓHIS ADDRESS (Even	If You Do Not Owi	n Them) Us	e Back Of Pa	ge, If Necessary		
Dog/Cat	Name	Breed	Age		-	Currently Vaccinated?	
Veterinarian w/	Pets' Records:	ts' Records:			Phone:		
Pet Owner's Name on Veterinary Records:							
On an Average D	oay, How Long Will Y	our Kitten Be Left	Alone:				
Who Will Care F	or Your Kitten If You	Are Gone For Mo	re Than 24	Hours?			
<b>What Are Your F</b>	Plans For Your Kitter	If You Move?					
						· Not:	
					me:		
Who Will Be Res	sponsible for Your K	itten?					
Please Initial:	Yes No	Will You Sch	nedule Yea	rly Exams/Va	ccinations For Your K	itten?	
Please Initial:	Yes No	Will You Giv	e Monthly	Flea/Tick Pr	eventative?		
<b>Expected Yearly</b>	Needs for Your Kitte	en?					
	I Understand that Completing this Form does <u>NOT GUARANTEE</u> I will Receive this Kitten or Any Other Kitten From TPKR. TPKR Reserves the Right to Refuse/Deny Pre-Adoption/Adoption to Any Home That Does Not Meet the Forever Home Criteria.						
	I Understand That My Pre-Adoption Fee Must Be Paid <u>AT THE TIME</u> Of Pre-Adoption Approval.						
			-		<u>FEIT</u> My Pre-Adoption		
Please Initial:			•	•	r I am Contacted that i	it is Ready. If i	
Please Initial:	Fail To Do So, I Will Forfeit My Kitten <u>AND</u> My Adoption Fee.  I Understand That If I Decide Not to Adopt the Kitten I Have Pre-Adopted, I Will Forfeit My Adoption Fee.						
Please Initial:	I Understand That If I Am Told My Pre-Adopted Kitten Has Become Fatally or Chronically Ill, My Paid Fee Can Be Applied To Another Kitten or It Can Be Refunded.						
Please Initial:	nitial: I Understand that a <u>HOME VISIT</u> May Be Required Before I Can Be Approved for Pre-Adoption.						
Please Initial:	al: I Understand that I am Making a <u>LIFETIME COMMITMENT</u> to My New Kitten.						
	es You Have Known fo ot In Your Home):	or At Least 1 Year	Who Are F	amiliar With	Your Relationship Wi	th Animals (including 1	
Name:				Phone	·		
Name:		Phone:					
	Signature of	Applicant				Date	
			TINY PAWS	<u>STAFF</u>			