

BARN CAT ADOPTION APPLICATION

P.O. Box 72

Grangeville, ID 83530

Email: arrf.grangeville@gmail.com
Webpage: www.arrfgrangeville.org

Phone _____ Name: _____ Address: ____ ______ State: _____ Zip: _____Phone Number(s): _____ Place of Employment:______ Age:_____ Email Address: Please provide a personal reference: Name: ______ Address:_____ Phone: Reason you are wanting to adopt barn cat(s)? How many cats are you interested in adopting? Address of the property where the cat(s) will reside: What type of shelter is available for the cat(s) on this property? Do you own or rent the property where the cat(s) will reside? OWN RENT If renting, please provide landlord name & phone number: If renting, does the landlord agree to provide care for the cats if for any reason you are unable to do so? Will you provide food and fresh water for the cat(s) on a daily basis for their lifetime? ______ If a barn cat becomes ill or injured, do you agree to humanely trap and take it to a veterinarian for treatment? Do you realize that a cat may live 15 or more years? YES NO When relocating a feral cat, it is essential to keep the cat(s) in a safe and secure place where you can provide food, water and a litter box without them escaping, so they can become acclimated to their new surroundings. Allowing the cat(s) time to get used to their new home will help the relocation be successful. This usually takes approximately 7 - 10 days. By signing below, I certify that the information I have given is true and that I recognize that any misrepresentation of the facts may result in my losing privilege of adopting barn cats from ANIMAL RESCUE FOUNDATION (ARF). I authorize investigation of all statements on this application. Signature: Landlord signature (if applicable): ______ Date: _____ ARF representative signature: ______ Date: _____ Applications may be EMAILED TO: arf.grangeville@gmail.com

Or dropped off to _____