

Last Name:	First Name:
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Michigan Siamese Rescue

**9691 TREE TOP COURT**  
**PINCKNEY, MI 48169**  
 INFO@SIAMESE-RESCUE.COM  
 WWW.SIAMESE-RESCUE.COM

## ADOPTION APPLICATION

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

Personal Information		
First Name:	Last Name:	
Address:		
City:	State:	Zip Code:
Home Phone: <i>(Include area code) PLEASE INCLUDE THE BEST TIME TO REACH YOU</i>	Work Phone: <i>(Include area code)</i>	
Home E-mail:	Work E-mail:	
Nearest Large City:	Cell phone: <i>(Include area code)</i>	Pager: <i>(Include area code)</i>
Vet Information:		
Vet's Name:	Phone <i>(Include area code):</i>	
Address:		
City:	State:	Zip Code:
Family Information:		
Who will be affected by this adoption? Significant Other? Children?		
Children Living in Household <i>(please include number and ages):</i>		
Pets Currently Living in Household <i>(please include number and type):</i>		
Pets(s) Names:		
Are your dogs/cats up to date on vaccines?	Are your dogs/cats spayed/neutered?	
If not, why not?		
Cats at home – Have they been tested for Feline Leukemia & FIV?		
When?		
Results:	Do they go outside?	
Home Situation (Own/Rent): <i>(If renting, attach letter from landlord indicating pets are allowed)</i>	How many years at current residence:	
Average number of hours a day someone is home:		

Have you ever given up an animal before, and if so, why?

Previous experience with Siamese:

Why do you want to rescue a Siamese or Siamese Mix, as opposed to getting one from a breeder?

Are you prepared to deal with the emotional and/or physical “baggage” that many rescued cats have?

Are there any emotional or physical problems that you would not be willing to tolerate?

Will you commit to continuing any special requirements that a rescued Siamese/Siamese Mix that you adopt may need, such as special diet; additional litter pans; medication, etc?

Yes \_\_\_\_\_ No \_\_\_\_\_

If you find that you can not meet the requirements of a “special needs” cat that you adopt, will you agree to return the cat to Michigan Siamese Rescue?

Yes \_\_\_\_\_ No \_\_\_\_\_

Age desired:	Sex desired:	Point type desired:
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Are you interested in any particular Siamese/Siamese Mix listed on our Petfinder.com site?

Two References (Not Related):		
Name:	Phone:	E-mail:
Name:	Phone:	E-mail:
How did you hear about us?		
Best time to call your references?		
Might you be willing to foster a cat while we look for your “forever” companion?		

**Comments:**

Understanding that a Rescue Shelter houses cats from unknown backgrounds, I assume the risks of being bitten, scratched, injured, or frightened by the cats and kittens in connection with my visits to the Michigan Siamese Rescue (MISR) foster homes. MISR is not liable to me for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever, which I might suffer or sustain in connection with my visits to MISR or their foster homes. **Initial your approval here \_\_\_\_\_**

I understand that the recurring cost of maintaining a cat can exceed \$100 per year of vet bills, vaccinations and routine tests. I agree to perform all routine health maintenance annually. **Initial your approval here \_\_\_\_\_**

I understand that the cat(s) I've requested on this application are not guaranteed to me, even if my application is approved. I understand that MISR reserves the right to place any particular cat into any particular home and that my approved application gives me no right to any particular cat(s). **Initial your approval here \_\_\_\_\_**

I understand that even if my particular home situation may be right for a particular cat, that other applicants with a higher priority (based on date completed application is received) than mine may have preferential rights to that particular cat. **Initial your approval here \_\_\_\_\_**

*Before signing this Application, please be aware of the following:*

- ❖ If you adopt a Siamese or Siamese mix from MISR, the animal may not be abandoned or relinquished to a shelter. While we can not guarantee that we will be able to take the cat back into a foster home, we will assist you in locating another home.
- ❖ If any emergency occurs involving this animal, MISR must be contacted.
- ❖ Adopted cat(s) may be reclaimed at any time by MISR if it is learned that the terms of your Contract are not met or if there is any falsification of information on any documents you have submitted.
- ❖ MISR will be more than happy to provide you with advice on any problem you have with the pet to the best of our capabilities.
- ❖ If the Siamese or Siamese mix adopted is too young to be spayed or neutered at the time of adoption, by signing this Application, you agree to have the pet spayed or neutered at the appropriate age, providing MISR with confirmation of the sterilization, in return for which a spay/neuter deposit, paid at time of adoption, will be refunded.
- ❖ You agree to care for the adopted cat according to all state and city laws, including licensing requirements.
- ❖ You agree to maintain proper vaccination of the adopted cat for rabies and distemper.
- ❖ You understand that no refunds are given on adoption fees should the adoption not be successful, although MISR will assist you in the selection of another cat of your choice.

***I certify the above to be true and complete to the best of my knowledge.***

**Signature:** \_\_\_\_\_

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

*There is a \$10 non-refundable application fee (not applicable to the adoption donation) required before this application will be processed. If mailing the application please include fee. If faxing or emailing this application you may mail the fee separately or pay to CreditCard@Siamese-Rescue.com by using www.PayPal.com.*

*If this form is filled out online or as an emailed document it will be considered void if there have been any changes to the language of this form. If received by email the applicant waives their actual signature and accepts all contract language in this application by placing their initials here:\_\_\_\_\_.*



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**VETERINARY REFERENCE**

I, \_\_\_\_\_ have applied to Michigan Siamese Rescue (MISR) to adopt a cat. MISR requires a veterinary reference to ensure appropriate placement. I hereby give permission for you to complete this reference form and send it to MISR as well as to answer any and all questions that a MISR representative may have about myself and/or any veterinary care that has been provided to any animal that I have brought to your clinic. I agree to hold you harmless and free of any liability regarding any information that you might give to MISR. (To the applicant: we will call your Vet. Please do not "help" your Vet by filling anything in or by signing the form for them, this will severely damage your chance at approval.)

Applicant signature \_\_\_\_\_  
Date \_\_\_\_\_

Name of veterinarian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

How long have you known this client? \_\_\_\_\_

How many cats does he/she own? Male \_\_\_\_\_ Female \_\_\_\_\_

Cat 1: \_\_\_\_\_ FeLeuk date \_\_\_\_\_ Result \_\_\_\_\_ FIV date \_\_\_\_\_ Result \_\_\_\_\_  
Date of most recent rabies vac \_\_\_\_\_ Date of most recent other vac \_\_\_\_\_  
Date of spay \_\_\_\_\_ Date of neuter \_\_\_\_\_

Cat 2: \_\_\_\_\_ FeLeuk date \_\_\_\_\_ Result \_\_\_\_\_ FIV date \_\_\_\_\_ Result \_\_\_\_\_  
Date of most recent rabies vac \_\_\_\_\_ Date of most recent other vac \_\_\_\_\_  
Date of spay \_\_\_\_\_ Date of neuter \_\_\_\_\_

Cat 3: \_\_\_\_\_ FeLeuk date \_\_\_\_\_ Result \_\_\_\_\_ FIV date \_\_\_\_\_ Result \_\_\_\_\_  
Date of most recent rabies vac \_\_\_\_\_ Date of most recent other vac \_\_\_\_\_  
Date of spay \_\_\_\_\_ Date of neuter \_\_\_\_\_

How many dogs does he/she own? Male \_\_\_\_\_ Female \_\_\_\_\_

Have all dogs been spayed or neutered: Yes \_\_\_\_\_ No \_\_\_\_\_

What is your opinion of dog(s) temperament? In general: \_\_\_\_\_

Re cats: \_\_\_\_\_

Are there any reasons why you would NOT recommend placement of a Siamese with this client?

Veterinarian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Please use back, copy form or attach an extra sheet for any additional information.