

Cause For Paws Fl



Adoption/Foster Information

Cat/Kitten being adopted: _____

Name of adoptive parent: _____

Address of parent: _____

Telephone number: _____

E-mail Address: _____

Rent or Own: _____

If Rent / Landlord contact info: _____

Children in home: _____

Current Pets in home: _____

Owned Pets previously: _____

I understand that all pets adopted through Cause for Paws Fl must be loved and housed inside my home. They are not to be allowed outside unless the area is secure (screened in). I understand that I am responsible to care for them medically which means the pet is to receive flea/tick preventative and annual medical exams along with any vet care required if the pet becomes ill. I understand that it is my responsibility to register the pet with Broward County Animal Care. I will love and care for my pet for its entire life. Should something unforeseen happen and I can no longer keep the pet, I will contact Cause for Paws Fl.

Signature of Adopter

Date