

DocuSign #: Receipt #: Date:

Getting to Know You Feline | Pre-Adoption Questionnaire

To help our staff be th	e best matc	hmakers possible	e, we hav	e a few que	stions	for you!
Animal Name:		Ar	nimal ID: _			
Name:			SB Pers	son ID: (office use only)		
Address:						Apt. #:
City:		Postal Code:				
Primary Phone #:	,	Seconda	dary Phone #:			
Email Address (Require	ed):					
What is your current I rent my ho I have obtained the re Type of Residence (h	me. elevant per ouse, apart	ollive with my pmissions (Landloment, etc.):	ord, pare	nts, etc.):	• Yes	s ONo
Tell us about the po	ets you cu	rrently own:				
Type/Breed	Age	Sex (check all that ap	pply)	Vaccines Up To Date	<u>,</u>	Length Owned
		FemaleMaleSpayed/Net	utered	O Yes O No		
		FemaleMaleSpayed/Net	utered	OYes ONo		
		O Female O Male O Spayed/Neu		OYes ONo		

The Regina Humane Society reserves the right to refuse any applicant.

I prefer a cat that will enjoy:

Living indoors	 Living outdoors exclusively 	Living in our workshop or barn

Living indoors/time outdoors
 Living indoors but having unsupervised time outdoors

Please fill out the questionnaire below so we can help you find your perfect match!

1.	I have lived with cats before.	No		Yes Date			Currently	
2.	My cat will be	Inside		Inside and outside		side	Outside	
3.	I would consider my household to be like	A library		٨	Middle of the road		A carnival	
4.	I am comfortable with a cat that likes to play "chase my ankles" and similar games.	No		Somewhat			Yes	
5.	I want my cat to interact with guests that come to my house.	A little of the time		Some of the time		me	All of the time	
6.	How do you feel about a boisterous cat that gets into everything?	I love them but would rather not live with them.		Depends on the situation		tuation	Fine by me	
7.	My cat needs to adjust to new situations quickly.	Not important			Somewhat		Yes	
8.	I want my cat to love being with children in my home.	Not Important		Some of the time		me	Most of the time	
9.	My cat needs to be able to be alone.	Less than 4 hours per day		4-8 Hours per day		day	8+ hours per day	
10.	When I'm at home, I want my cat to be by my side or in my lap.	A little of the time		Some of the time		me	All of the time	
11.	I want my cat to enjoy being held	Little of the tir	ne	Some of the time		me	Most of the time	
12.	I need my cat to get along with (circle all that apply)	Dogs	Ca	ts Birds Other (list):		(list):		
13.	l prefer my cat to be talkative.	No		Yes			Not important	
14.	I want my cat to play with toys.	A little of the time		Some of the time		me	All of the time	
15.	I want my cat to be active.	A little of the time		Some of the time		me	All of the time	
16.	It is most important to me that my cat							

Bring your completed questionnaire and identification to the reception desk.



Photo Release Waiver

At the RHS we love celebrating our adopted animals and their superhero adopters. One way we do this by sharing "go home" photos on social media or other platforms. We would like to have a photo of you and your new pet for possible use to help other animals find their forever home too!

Please review the information below, and provide your signature if you will permit us to use your photo:

I hereby grant the Regina Humane Society permission to use my likeness and that of my pet in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications and social media without payment or other consideration.

I understand and agree that all photos will become the property of the Regina Humane Society and will not be returned.

I hereby irrevocably authorize the Regina Humane Society to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge the Regina Humane Society from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE WAIVER. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENT/GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW. I ACCEPT:

Animal ID#:		Animal's Name at Shelter		Animal's New Name (If Applicable)	
Print Name			Signatu	re	Date

FOR OFFICE USE ONLY

On hold:	Yes	No	Reason:				
Hold Expira	tion: Dat	e:		Time:			
Adopter Co	Adopter Communication Notes:						

Post Adoption Administration

- O Adoption video/checklist completed.
- O Adoption contract signed and emailed.
- O Microchip form submitted to vet department.
- Vet discharge form submitted to vet department (if applicable).
- Pre Adopt form submitted to vet department (if applicable)
- O Adoption photo and waiver sent to creative coordinator (if applicable)