

# Poquoson Animal Welfare Sanctuary

## Adoption Application

Mailing Address: P.O. Box 2204, Poquoson, VA 23662

Sanctuary Address: 181 Messick Road

Phone Number: (757) 868-1379

Email: [pogpaws@gmail.com](mailto:pogpaws@gmail.com)

P.A.W.S. Cat Name \_\_\_\_\_ New Name? \_\_\_\_\_

Your Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Best contact phone numbers \_\_\_\_\_ Email Address \_\_\_\_\_

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I will not have my cats declawed \_\_\_\_\_

My cat will be indoors only \_\_\_\_\_

Questions?  
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What age children live in your home? \_\_\_\_\_

Do they have experience with cats? \_\_\_\_\_ Any known allergies? \_\_\_\_\_

Is everyone in your home in agreement with this adoption? \_\_\_\_\_

Are you willing to have a home visit? \_\_\_\_\_ Best times? \_\_\_\_\_

What other pets live in your home? \_\_\_\_\_

Are they spayed/neutered? \_\_\_\_\_ UTD with vaccines? \_\_\_\_\_

What veterinary hospital do you use? \_\_\_\_\_ Phone number? \_\_\_\_\_

Have you ever given a pet away? \_\_\_\_\_ Why? \_\_\_\_\_

Will you love, respect, and care for your cat for the rest of his/her life? \_\_\_\_\_

We believe that adoption is for life. Do you agree to contact P.A.W.S. if you can no longer care for your cat? \_\_\_\_\_ (757) 868-1379 Please never give your cat to another shelter or rescue.

All domestic animals adopted from releasing agent(s) are required to be sterilized in accordance with code of Virginia, sections 3.-2-6574. A Person who violates this article is subject to a civil penalty of up to \$250.00. All cats from P.A.W.S. have been spayed/neutered before adoption! Your cat has also been microchipped, tested for FIV/FeLV, received age-appropriate vaccines, dewormed, and given flea treatment. Your adoption fee helps cover that cost to enable us to continue to rescue!

You are entitled to a free exam from Poquoson Veterinary Hospital /868-8532) or Salty Paws Veterinary Hospital (223-1900) within 30 days of adoption.

Copies of medical records pertaining to your new cat will be given and should be taken to the veterinarian. I will not hold P.A.W.S. responsible for any illness after adoption. (initial) \_\_\_\_\_

(Your Name) \_\_\_\_\_ expressly agrees to indemnify and save Poquoson Animal Welfare Sanctuary, Inc., its board members/volunteers, harmless from and against any and all claims, loss, damages, injury, liability, and costs however causes, resulting from, arising out of, or in any way connected with this adoption.

If P.A.W.S. is notified of any suspected abuse or neglect of animals in your care, we will request that you surrender the animal you have adopted from us. Please sign to indicated that you have never been convicted of animal cruelty, neglect, or abandonment.

Name \_\_\_\_\_ Date \_\_\_\_\_

“Paws Up” for giving a cat a “forever” home! Please “like” and “share” us on Facebook!

Questions?