

SHAWMEKATZ KITTEN APPLICATION FORM

Legal name:

**Actual physical address not place of employment:
Street, City, State & zip code**

Home and cell phone number please include both:

Valid email address:

Have you ever owned a cat before? Yes or No

Have you owned a Siberian cat before? If yes, where did you get your Siberian?

Do you or anyone living with you have any other pets? Yes or No

If so, how many, types, age and, breeds:

ALLERGY QUESTIONS SECTION ANSWER ALL:

Does anyone in your household have allergies? Yes or No

Are the allergies severe or mild? Yes or No

**Are you willing to take allergy medications if needed to tolerate
your Siberian? Yes or No**

Do you get hives? Yes _____ or no _____

Do these allergies involve airway closures? Yes ___ or No ___

Do you or are you willing to take allergy shots? Yes ___ or No ___

If it a child with allergies, what is the age of this child? _____

Where have you looked for kittens so far? Please check all that apply

- *Other Siberian catteries _____
- *I visit other catteries often _____
- *Rescues _____
- *A friend or relative has a Siberian _____

Do you plan on letting your cat or kitten outside?

- *Yes _____
- *Only during the day _____
- *Once it becomes an adult _____
- *Only on a leash _____
- *Never _____
- Notes for explanation:

Have you ever had to get rid of an animal? Yes or No/ Why?

- *How long at present address? _____
- *Own _____
- *Rent _____
- *Live with family or friends _____
- *Will be moving within the next six months _____

Notes for explanation:

If renting do you have any pet restrictions? _____

What do you plan on feeding your Siberian? Please be definitive as possible

- Vet recommended diet _____
- Canned/dry _____
- Raw _____
- Whatever breeder recommends _____

Are you or any members of your family active or retired military? Yes_____No_____

Would you do with your kitten if you or one of your family members turned out to become allergic to your kitten/cat?

What are you thoughts and feelings about your kitten possibly scratching furniture or breaking knickknacks?

How do you feel about the smell of the litter box? How y do you plan on rectifying this? Where do you plan on keeping the litter box?

Number of ALL family members and ages (include yourself, all members and, their ages as well)

How many days/hours do you work a week?_____

Heating and cooling for home. Please check all that apply.

***Oil/gas/electric_____**

***Wood stove/pellet stove_____**

***Central air_____**

***Window fans/Window AC units_____**

***Do you have a balcony or sliding glass doors in your home?Yes___or No_____**

I am looking for a Siberian cat or kitten for:

***Breeding - I am a breeder_____**

***Show - I am interested in showing my kitten/cat_____**

***Pet- loving companion_____**

I am interested in:

A Siberian kitten 14 - 16 Weeks old_____

Young Siberian 6 months old_____

Two Siberian kittens_____

A retired queen and a kitten_____

What is most important to you please check all that apply:

- **How fast I can get one**_____
- **Health testing of parents**_____
- **Price of kitten**_____
- **Color of kitten/sex of kitten**_____
- **I want my kitten spayed or neutered**_____
- **I do not want my kittens spayed or neutered**_____
- **I want my kitten registered**_____

How soon are you looking to get a kitten?

As soon as possible_____

3 to 6 months_____

Willing to wait for the right one _____

I understand by agreeing to put a hold/reservation on a kitten, it is a non-refundable fee. Answer yes_____ or no_____

Name, address and, phone number of your Veterinarian:

Questions for Shawmekatz:

Tell me a little about yourself, your home life and, expectations for your kitten so as to help me guide you through the Siberian cat or kitten selection process. The more thorough you are the easier it is to you up match with a kitten.