

TELL US WHAT YOU'RE LOOKING FOR

- Sex: Female Male No preference
- Age: Kitten Young adult Adult Senior No preference
- Energy: Low Moderate High No preference
- Coat: Short Medium Long No preference

Type/Breed:

Personality:

IT IS VERY IMPORTANT FOR MY CAT TO... (please check all that apply)

- Be friendly with children Be friendly with visitors to the house Be playful
- Be friendly with other cats Enjoy being held Be quiet
- Be friendly with dogs Be calm Be independent

HOW FAMILIAR ARE YOU WITH THE FOLLOWING?

| | Not very familiar | I have heard about this | I have dealt with this | Very familiar | I would Like some more info |
|---|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------------|
| Fearfulness of people | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fearfulness of other animals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fearfulness of new environments | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Aggression towards other animals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Aggression towards people | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Litter Box issues (ie urinating outside of the box) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| General anxiety | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Destructive behaviour | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| High energy/hyper activity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

In order to keep you informed about important campaigns and to ask for support, we will from time to time telephone, email and send mail to you. If you would prefer not to receive phone calls, emails or mail please check this box

I agree to the sharing of personal information with Royal Canin Canada Company. I may receive newsletters and other commercial electronic messages from Royal Canin Canada Company. I may withdraw my consent at any time using the unsubscribe mechanism provided to me in communications from Royal Canin. If you would prefer not to receive information from Royal Canin please check this box

Applicant signature: _____

Date: _____

Thank you for completing this questionnaire.

The information provided will help us to find the best matches to your interests.