

CARE ADOPTION APPLICATION

NAME _____

puppy _____ dog _____
kitten _____ cat _____
I.D. _____
Name: _____
Description _____

PHONE _____ (home) _____ (work)
EMAIL ADDRESS _____

Why do you want to adopt a pet? _____

Who will be the primary caretaker of this pet? _____

Is there anyone in the home who may be adversely affected by care of dogs/cats (allergies, etc.)? _____

Do you live in a. House _____ Townhouse _____ Apartment _____ Condominium _____ Mobile Home _____ Do you: Own _____ Rent _____
Do you have the landlord's permission to have a dog/cat? Landlord Name/Phone # _____

Do you have a fenced yard? _____ Yard Size _____ Type and height of fence? _____

Where will the animal be kept during the day? _____ At night? _____

Will this be your first pet? _____ List any other pets you have, if they are on heartworm preventative and if they are spayed or neutered:

Do your pets get along with other animals? _____

Have you had other pets in the last 5 years and what became of them? _____

Are your pets up to date on vaccinations? _____ May we contact your veterinarian? _____ Please provide name, address and phone # of most recent veterinarian: _____

Are you prepared for the expenses of yearly boosters, emergency medical care and routine care for possibly 10-15 years? _____

Adults in the home _____ Children in the Home _____ Children's ages _____ Do all members of household want to adopt this pet? _____

How long have you lived at your present location? _____ Do you anticipate moving in the near future? _____

Are you willing to make a lifetime commitment to this pet? _____

Applicant's signature

Date

CARE Rep. Signature

Date

DISPOSITION

ADOPTED: _____ DENIED _____ REASON FOR DENIAL _____