**Adoption Application**



 Name(s) of animal(s) you would like to adopt:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant’s Information**

First Name Last Name

Address

City State ZIP

Home number Cell number

Work number Email

**Veterinarian Information**

Name Phone Number

**Background Information**

1. Do you have children living in your home? ❑ Yes or ❑ No

 If yes, what are their ages?

 Have they been exposed to pets?

2. Do you have pets now? ❑ Yes or ❑ No

 Are your pets vaccinated? ❑ Yes or ❑ No

 If yes, by whom?

3. Where do your pets live?

 Are your pets spayed / neutered? ❑Yes or ❑ No

 If not, why not?

4. If you own dogs, have they been tested for heartworms? ❑ Yes or ❑ No

 Results: ❑ Positive ❑ Negative

5. Are your animals on heartworm / flea prevention? ❑ Yes or ❑ No

 Brand:

6. Has each adult living in your home consented to adopting this animal? ❑ Yes or ❑ No

7. Where will your new pet stay? ❑ Indoors ❑ Outdoors ❑ Both

 If outdoors, how will the pet be restrained? Fenced yard Invisible fence ❑ Lot ❑ Other

8. If you are adopting a cat, are you considering having the cat de-clawed? ❑ Yes ❑ No ❑ Maybe

9. Do you own or rent your home? ❑ Own ❑ Rent

 If you rent, please provide land lord phone number for approval or proof of pet allowance:

10. Your type of residence: ❑ House ❑ Apartment ❑ Townhouse ❑ Condo

11. Any other information you would like us to consider?

12. References: