



PERSONS ADOPTING AN ANIMAL FROM THIS SHELTER MUST BE AT LEAST 18 YEARS OLD

Application for Adoption

Date of Application: _____

Animal ID/Name of animal applying for: _____

Applicant's Name: _____ Date of Birth: _____

Telephone: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Email: _____

Please Identify that which best describes your current living accommodations: Single Family House

Duplex Apartment Condominium Townhouse Mobile Home Farm

Other: (please explain) _____

Do you rent or own? _____

If renting, please provide your landlord's information. We need to speak to them to verify information.

Name: _____ Phone: _____

Do you have a fenced in yard on your property? Yes No

How many individuals reside in the residence? Adults: ___ Ages: _____ Children: ___ Ages: _____

Have you ever owned a dog or cat before? Yes No

If yes, what kind and what breeds have you had? _____

How many pets are currently at this residence?

<u>Name of Pet</u>	<u>Breed</u>	<u>Gender</u>	<u>Fixed</u>	<u>Age</u>	<u>How long have you owned?</u>
_____	_____	M/F	Y/N	___	_____
_____	_____	M/F	Y/N	___	_____
_____	_____	M/F	Y/N	___	_____
_____	_____	M/F	Y/N	___	_____

Are these pets up to date on their Core vaccines (including Rabies)? Yes No

Do you use monthly preventives (Flea and Tick and Heartworm) for all pets? Yes No

Name of current/past Vet Practice: _____

Have you ever surrendered an animal before? Yes No

If yes, please explain why: _____

Where will this pet be primarily kept? _____