

Pet's Name: \_\_\_\_\_

Date: \_\_\_\_\_

**We are thrilled you are considering adoption! In order to apply, you must:**

- Be at least 18 years of age
- Have consent of the entire household and landlord
- Understand that we want to find the right pet for your family & may suggest a different pet

**Where did you hear about this pet?**

- Facebook       Website       Newspaper       Friend/Family       Billboard  
 Breed Request       Drive by       TV Commercial       Other: \_\_\_\_\_

## You and Your Household

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Apt #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Apt #: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

I consent to receive electronic messaging:  Yes  No (*will not receive free 30 day accidental insurance, see attached form*)

If yes, please provide email address: \_\_\_\_\_

I live in a:  Single-family home       Own       Apartment       Rent  
 Live w/relative or friend      Landlord Phone number: \_\_\_\_\_

Does anyone in the household have allergies to animals?      Yes      No      Unsure

Are you adopting this pet as a gift for someone else?      Yes      No      If yes, for whom: \_\_\_\_\_

Are there children who visit your home?      Yes      No

List the names of the pets in your home currently: \_\_\_\_\_

Who is your Veterinarian? \_\_\_\_\_ or  I need one

## The Pet's Environment

*When you are **NOT** home, where will the dog stay?*

- Fenced yard; type \_\_\_\_\_  
 Crate in the house  
 Loose in the house  
 Confined to one room in the house  
 On a tie outside  
 Garage  
 Other: \_\_\_\_\_

*When you **ARE** home, where will the dog usually stay?*

- Fenced yard       Crate in the house  
 Confined to one room       Loose in the house  
 Garage       On a tie outside  
 Other: \_\_\_\_\_

*What behaviors or circumstances will you **NOT** tolerate?*

- Housetraining problems       Allergies  
 Aggression       Health issues of dog  
 Problems w/other pets       Destructiveness  
 Other: \_\_\_\_\_

### Office use only

Adoption Fee: \$ \_\_\_\_\_  
 Additional Item/Amount: \$ \_\_\_\_\_  
**Total:** \$ \_\_\_\_\_  
 Payment Type: \_\_\_\_\_  
 Receipt number: \_\_\_\_\_ Staff Initials: \_\_\_\_\_