

Name _____
Address _____
Phone _____
E-mail _____

IN ORDER TO BE CONSIDERED AS AN ADOPTER TODAY, YOU MUST: Be 18 years of age or older.

Have the knowledge and consent of your landlord.
Be able and willing to spend the time and money necessary to provide training, medical treatment, and proper care for a pet.

Please fill out the following questionnaire:

1. What kind of pet are you here to adopt? Dog__ Puppy__ Cat __ Kitten __ Other__

2. Please check any of the following reasons for adopting a pet:

Watchdog __ Companion __ Barn Cat/Mouser__ Breeding __ Hunting __
Child's Pet__ Companion For Other Pet__ Other (specify)_____

3. Do you own any pets at the present time? Yes__ No__ If yes, please list information.

Name _____

Breed/Species _____

Age _____

Spayed/Neutered _____

4. Who is your veterinarian? _____ Phone #: _____

A pet needs to be seen by a veterinarian AT LEAST ONCE A YEAR for annual vaccinations and examination.

Will you provide regular veterinary care for your pet? Yes ____ No ____

5. Do you currently live in a house__ apartment__ mobile home__ other _____

If mobile home, is it in a trailer park? Yes__ No__ Park

Name _____

Do you own or rent? _____

If you rent, does your lease allow pets? Yes__ No__

If you rent, what is your landlord's name?

_____ Phone#: _____ 6. How many people live in your household? _____

If there are children in the household, what are their ages?

_____ Will children be involved in daily pet care? _____

7. Where will this pet be kept during the day? _____ night? _____

If outside, pen__ chain__ fenced-in yard _____

8. Is someone home during the day? Yes__ No__

How long will pet be left alone? _____

9. Do you plan on spaying or neutering your pet? _____

10. Have you ever given up an animal? Yes___ No___

If yes, to whom? _____ why? _____

11. A new pet will take time to adjust to you, the new environment, other pets, and new routines.

How long would you consider to be reasonable for an adjustment period? _____

12. Do you intend to move over the next year? Yes___ No___

13. Have you ever adopted from us? Yes___ No___ If yes, when? _____

14. Is anyone in your family allergic to pets? Yes___ No___

15. Employer's name _____ Phone # _____

16. It is part of the Shelter's policy to have a volunteer make a follow-up call to see how you and your new pet are doing. The standard mode of practice for this is by a telephone call or a scheduled home visit. Is this acceptable to you? _____

I acknowledge the above information to be true.

Signature: _____ Date: _____