

Jefferson County Humane Society

Better Options for Neglected Strays

ADOPTION AGREEMENT QUESTIONNAIRE

Date _____

Animal Name _____

Applicant Name _____

Physical Address _____

Phone _____ Cell Phone _____ e-mail _____

Do you live in a circle one _____ House, _____ Apartment, _____ Other?

For how long this address _____

If you rent do you have your landlord's permission to have this pet? Yes _____ No _____

Your landlord's name and phone number _____

Address _____

If not already done, would you have this pet spayed or neutered before it is 6 months old? Yes _____ No _____

Do you have children? Yes _____ No _____ How many? _____ Ages _____

Where will this pet live? Inside _____ Outside _____ Where will it sleep? _____

If outside, what kind of shelter will it have _____

Do you have a yard? Yes _____ No _____

If yes, is it fenced? Yes _____ No _____

What type of fencing? _____ How high? _____

Will this pet be tethered, tied or chained? Yes _____ No _____

What would you do if a behavior problem developed? _____

How would you discipline this animal? _____

Are you getting this pet as a companion, pet, working dog, guard dog, other? _____

How many hours a day will this pet be alone? _____

Please list animals you have owned in the last 10 yrs.

| Species | How old | How long you've had it | Current status |
|---------|---------|------------------------|----------------|
|---------|---------|------------------------|----------------|

Name /address/phone of your vet (if you don't have a current vet you must have one in place before adopting the animal) _____

Would you be willing to have your vet information released to us? Yes _____ No _____

Are you willing to care for this pet for the rest of it's natural life? Yes _____ No _____

What would you do with this pet if it should become blind, deaf, had to have an amputation, become incontinent or other disability? _____

If your animal became ill, how much would you be willing to spend for vet care? _____

Can you afford to provide medical care (vaccines, etc), food and necessities? Yes _____ No _____

Most counties require that a dog be confined to it's owner's yard or under direct control at all times. Would you comply? Yes _____ No _____

Would you agree to keep an identification tag on this pet at all times to insure it's safe return if it should become lost? Yes _____ No _____

What would you do if you had a baby and the animal had a difficult adjustment to it? _____

What would you do with this animal if you had to move? _____

Are any household members allergic to the type of pet you are applying for? Yes _____ No _____

What would you do with the pet if someone in your family became allergic? _____

Who will be responsible for this pet on a daily basis? _____

Who will be the responsible party while you are away ?

Name/Phone _____

Have all household adults agreed to adopting this pet? Yes _____ No _____

Please list family members _____

If applying for a puppy or kitten are you willing to put up with barking – crying, potty training, chewing, obedience lessons, etc. that come with raising a baby? Yes _____ No _____

For dogs and puppies: Do you know what heartworm infection is? Yes _____ No _____

Would you be willing to keep this dog/puppy on heartworm prevention? Yes _____ No _____

List three references (not currently living with you or relatives) we may contact: Name, address, phone number.

Our, (Jefferson County Humane Society), promise to you is that for any reason you cannot keep/care for this animal in the future ever, we will take this animal back and provide for it after being returned to the Society at the adopter’s expense.

Once an application has been accepted and approved and an animal chosen and the donation made I understand no refund will be given unless the animal becomes ill or dies before it is given to me. All animals have a thorough check up, shots will be current and the animals spayed/neutered before going to their forever home to certify they are healthy at the time off adoption. Even if you find another animal before you take possession off this animal, change your mind or decide you just don’t want the animal, NO REFUND WILL BE GIVEN FOR WHATEVER REASON.

I certify that the above is true, and that any false information may result in nullifying this adoption. I agree to keep a pet identification tag on this pet at all times to assure safe return if lost. If for ANY REASON I am unable to provide for this pet, I will return him/her to the Jefferson County Humane Society I understand that approval of this application is strictly at the discretion of the Jefferson County Humane Society.

Signature _____ Date _____

Jefferson County Humane Society
P.O. Box 2233
Pine Bluff, Arkansas
Phone or Fax 870-247-2409

Contacts: Tana Pointer 870-879-1927, Lisa Grigg 870-879-3294, Vicky DeWeese 870-692-2270

Notes: