



**BOND COUNTY HUMANE SOCIETY
PET ADOPTION PROFILE**

Animal Name or Description: _____ **Date:** _____

This adoption profile will help determine if the adoption is in the best interest of the pet and the adopter. All adoptions are subject to approval by Bond County Humane Society. Please note that since our mission is to reduce the pet overpopulation problem, we will not adopt to any homes with intact pets unless a reasonable explanation can be provided for not altering the animal.

Name: _____ Address: _____

City/State/Zip: _____ Phone: Home: _____ Work: _____

Email: _____ Driver License #: _____

Occupation: _____ Do you rent or own? ___ House, Apt, Condo, Trailer

If renting, please provide your Landlord's name & number: _____

How long have you lived at your residence? _____

If less than 1 year, please state how long at previous address: _____

How many adults in household? ___ How many children? ___ Children ages & sex: _____

Do any family members suffer from allergies? ___ If yes, please describe _____

How would you describe your family's lifestyle? Very Active Moderately Active Slightly Active

Are all family members in agreement about adopting a pet? _____

Who will be the primary caregiver for the pet? _____

Do you currently have any pets? ___ If yes, please list below.

Please list all the animals you have owned in the past 5 years

Name				
Breed/Age				
Sex/Altered				
Do you still own				
If you no longer own the animal where are they now? Lost? Hit by car? Put to sleep/died? Why? Given Away? Why? To Whom?				
Provide description of pet's temperament. Examples: playful, good with other dogs, selectively good with other dogs, good with cats, etc.				

Do you have a regular Veterinarian? _____

NOTE: If you currently own a pet or have owned one in the last 5 years, a veterinarian reference is required to process your application. If a vet reference is not supplied, please explain.

Name: _____ Address: _____

Phone: _____ How long have you been with this vet? _____

The reason I cannot supply a vet reference is: _____

Do we have permission to contact the veterinarian identified to obtain your current or past animal(s) vaccination, flea and heartworm prevention history? _____ If no, your application for adoption cannot be processed.

Have you owned a pet longer than 5 years ago? ____ If yes, please provide a description of your previous experience. _____

Why do you want to adopt a dog or cat? _____

How long has it been since you've had a puppy or kitten? _____

What would you do if this pet doesn't get along with your current pets? _____

On average how many hours will the pet spend alone each day? 0-2 3-5 6-8 9+

Where will the pet be kept when you are not home? Outside Crate Free Roam Other

What type of sleeping arrangements will you provide for your pet? Bed Crate Other

Do you have a fenced in yard? _____ Height/Style: _____ If yard is not fenced, how will you handle the dog's exercise and toilet duties? _____

Have you ever participated in Obedience training classes? Yes No . Please describe your experience with training and behavior programs? _____

How will you correct or discipline your pet? Physical Verbal Other

If adopting a dog will you enroll the dog in obedience classes? Yes No . If no, please explain why. _____

If your pet is a dog, what type of activities would you like to do with the dog? _____

What reasons would cause you to return the animal to BCHS? _____

PLEASE PROVIDE A NON-FAMILY REFERENCE

Name: _____ Address: _____

Home Phone: _____ Work Phone: _____ Relationship: _____

Do we have permission to contact the reference provided? _____ If no, your application for adoption cannot be processed.

Do you agree to license this pet and give it regular health care for the life of the pet? _____

Do you agree to return this pet to Bond County Humane Society if you decide not to keep it for any reason? _____

Would you be willing to allow someone designated by BCHS to visit your home by appointment? If no, please explain: _____

Do you agree to abide by all applicable state, county, and municipal laws applicable to animals and their care? _____

The information on this application will be kept confidential. I certify that all the above information provided above is complete and correct to the best of my knowledge.

Signature Date

For BCHS Use Only

Vet Check: _____ Date: _____ Notes: _____

Landlord Check: _____ Date: _____ Notes: _____

Reference Check: _____ Date: _____ Notes: _____