

Go

Adoption Application

The information we request in this form is to ensure that we are finding a quality permanent home for our Dogs. This information assists us in achieving the best possible match between a Dog and a potential new owner.

Your Name: Co-Applicant:

Address:

City: State: Zip:

Home Phone: Work Phone: Cell Phone:

Email:

Best Time of Day to be Contacted:

What Age, Color, and Sex of Dog are you interested in?

Are you interested in a specific dog – if so, name?

Primary Residence: Own Rent/Lease How long at this residence:

If you rent/lease, are pets allowed? Yes No

Name and phone number of landlord:

May we contact landlord? Yes No

Type of Residence: House Condo/Townhouse Apt Other

Do you have a fenced yard? Yes No Approx size of fenced area

Fence Height Completely enclosed Yes No

Is fence attached to house? Yes No

Is there shade in yard? Yes No Is there shelter in yard? Yes No

Do you have a dog door into house or garage? Yes No

Will the dog ever be left outside unattended? Yes No If yes, for how long?

If no fence, how will dog be let outside?

Is anyone home during the day? Yes No How many hours would dog be alone?

Where will the dog be housed at during the day? At night?

Where will the dog stay when home alone?

Do you own or have you ever used a crate? Yes, own and have used

No, but have used one Do not own and have not used

Will you allow us to conduct a home visit prior to adoption? Yes No

What do you do with your pets while on vacation?

Why are you interested in adopting this dog?

What breeds are you considering?

Are you looking for a dog as a: companion watchdog playmate for another dog playmate for a child gift for another person other:

Have you/anyone in the household ever owned a Dog? Yes No

Have you/anyone in the household ever owned this breed? Yes No

Do all adults in the household agree on adopting this dog? Yes No

Are there children in the household? Yes No Ages:

Do you have any neighbors, family, and/or friends who have children that will visit your home?

Yes No Ages:

Is there anyone in your household with Asthma or Allergies to cats/dogs? Yes No

What other pets do you currently have?

Type Breed Name Age Sex

Spayed/Neutered? Yes No

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Where are these animals kept?

What other pets have you had in the past five years?

What happened to them? If any of your pets have passed away, please provide age and cause of death.

What kinds of problems, if any, did you have with them?

Have you ever surrendered a pet to or returned a dog to a shelter? Yes No

If yes, explain.

Have you ever given away or sold a dog? Yes No

If yes, explain.

Adopted pets need time to adjust to their new surroundings. Are you willing to give the new dog at least a one month trial to allow

Adopted pets need time to adjust to their new surroundings. Are you willing to give the new dog at least a one month trial to allow the dog adequate time to adjust? Yes No

What would you consider a reason for not keeping an adopted pet?

If you currently have a dog, what type of dog food do you use?

Wet Dry How often? 1 x per day 2 x per day Self Feeder

Do you use heart worm prevention with your pets? Yes No Not sure

Type:

Do you use flea prevention with your pets? Yes No Not sure

Type:

Name of current Veterinarian:

Address, City, State, & Zip:

Phone Number including area code:

May we contact your Veterinarian? Yes No

If no current Veterinarian, name and number of another Veterinarian used in the past.

If no Veterinary reference, please provide the Name and Number of 2 personal references other than a relative. These may include neighbors, coworkers, breeders, trainers, etc.

By submitting this application, I agree that:

1. I am authorizing, through submission of this form, the Veterinarian(s) named above to release any information and records concerning past or present care of animals to TRUE CARE HUMANE SOCIETY; I agree to hold harmless and indemnify said Veterinarian(s) for providing such information.
2. I have not, nor has anyone in my household, ever been **charged** with any form of animal abuse, neglect, or cruelty.
3. I am 18 years of age and I have read this application in its entirety and have answered each question **honestly** and to the best of my ability.

Agree Don't Agree

Name(s) of Applicant(s): _____ , _____

Date: _____

TRUE CARE HUMANE SOCIETY

<http://mail.google.com/mail/h/182v5n8m3jzrh/?v=c&s=q&q=sc216&th=11723b79feb174b1>

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