

Adopter Profile

Thank you for wanting to adopt an orphaned pet! We will do our best to help you find the right pet for your home. If you don't see a pet currently in the shelter that you are interested in adopting, we will keep your profile on file for six months. In order to ensure that you and your new pet will be happy in the years to come, we would like to take time to discuss with you your personal expectations and the pet's individual needs, personality traits, as well as our follow-up services and training.

We will ask you to provide a valid form of identification that includes your address.

Date: _____ Name of Pet Interested in: _____

Name(s) Please list all adults residing in household: _____

Address: _____

Street

City/State/Zip

City/County of Residence: _____ Phone: _____ Work/Cell: _____

Email: _____ Will the Pet reside at the address provided? Yes / No

Housing: **Own** **Rent** **Live with Parents/Family** # years at address: _____

House **Apartment/Condo** **Farm** **Mobile Home/Trailer**

Landlord's Name: _____ Phone: _____

Currently a student? Yes / No

If YES, Parent's Name: _____ Phone: _____

Alternate/Emergency Contact Name: _____ Phone: _____

Have you ever owned: Dogs _____ Cats _____ Others _____

Have you ever surrendered a pet to us? **Yes** **No** When/Why? _____

Is anyone in your household allergic to any animals? **Yes** **No** Who/to what? _____

Number of children in household: _____ Children 5-18 _____ Children under 5 _____

Pets you own currently: # of Dogs _____ Sex _____ # of Cats _____ Sex _____

Are your pets spayed/neutered? **Yes** **No** **Some are/Some are not**

Spayed/neutered pets: _____ Unspayed/neutered pets: _____

Are your pets current on vaccinations: **Yes** **No**

Which veterinarian do you use/plan to use: _____ Phone: _____

This animal will spend time in the following: *Mark all that apply*

Home **Garage** **Basement** **Yard**

Indoor Only **Outdoor Only** **Barn**

Questions/Concerns about adopting you would like to discuss: *Mark all that apply*

Litter box/house/crate training **Exercise** **Vet Care** **Grooming/nail trimming**

Flea/tick/heartworm prevention **Diet** **Pets and Kids** **Introducing Pets**

Puppy/kitten-proofing your home **Chewing** **Senior Pet Care** **Finding a Trainer**

Microchips and Other ID Options **Declawing** **Moving with Pets** **Pulling on-leash**

I acknowledge that all the above information is accurate to the best of my knowledge. I understand that any willful misrepresentation will result in termination of the adoption process. By signing below, I also verify that neither I nor any member of the household has been convicted of animal cruelty, neglect or abandonment. I understand that this is only an application and no adoption will take place until it is approved and an adoption contract is completed and signed. I understand that this organization reserves the right to refuse adoption to anyone. **This institution is an equal opportunity employer and provider.*

Applicant's Signature: _____

STAFF USE ONLY BELOW THIS LINE

Application Received By: _____ **On:** _____ **Did you speak with the applicant?** _____

Student Parent approval verified by _____ **Comments:** _____

Petpoint checked **Landlord checked**

Notes: _____

Approved **Not Approved**

Primary Reason: _____ **By:** _____ **On:** _____