



2170 Old Furnace Road  
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### Adoption Profile

Thank you for your interest in adopting! We will do our best to help you find the right pet for your home. If there isn't a pet currently in the shelter that you are interested in adopting, we will keep your profile on file temporarily. If you are approved to adopt, we will ask you to provide a valid form of identification that includes your address.

Date: \_\_\_\_\_ Name(s) of Pet(s) Interested in: \_\_\_\_\_

First and Last Name: \_\_\_\_\_

Full Names of any other adults residing in household: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_  
Street Address (physical address, no PO Box) City/State/Zip

City/County of Residence: \_\_\_\_\_ Will the pet reside at this address? Yes  No

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_ Email: \_\_\_\_\_

Alternate/Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Housing: Own  Rent  Live with Parents/Family  How long at this address? \_\_\_\_\_

What's your housing situation? House  Apartment/Townhome  Mobile Home/Trailer  Farm

If you rent, landlord's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you currently a student? Yes  No  If so, which school? \_\_\_\_\_

If you are a student, parents' name: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever owned pets? Yes  No  If yes, how many: 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: \_\_\_\_\_ Ages: \_\_\_\_\_

Please list ALL pets you currently own and reside at your place of residence.

Pet's Name	Species (cat, dog, rabbit, bird, etc)	Breed	Age	Sex (M/F)	Spayed or Neutered (yes/no)	Indoor (I) Outdoor (O) Both (I/O)	Up to date on vaccines? (yes/no)

Which veterinarian do you use/plan to use? \_\_\_\_\_ Phone: \_\_\_\_\_

Where will this animal spend most of its time? *Mark all that apply.*

Home  Garage  Basement  Yard  Barn  Indoors  Outdoors

Other: \_\_\_\_\_

Do you have any questions or concerns about adopting you would like to discuss? *Mark all that apply.*

Litter box/house/crate training  Declawing  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

May we add you to our newsletter email list? Yes, please!  No thanks.

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: \_\_\_\_\_

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**STAFF USE ONLY BELOW THIS LINE**

Application Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Did you speak with the applicant? \_\_\_\_\_

PetPoint checked  Notes: \_\_\_\_\_

Housing own/rent checked  Notes: \_\_\_\_\_

Student Parent approval verified by \_\_\_\_\_ Comments: \_\_\_\_\_

Notes: \_\_\_\_\_

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Approved  Not Approved  By Manager: \_\_\_\_\_ Date: \_\_\_\_\_