

Adoption Application

Pet ownership is a serious responsibility. It is the policy of _____ to assure that each person who adopts a pet is not only aware of that responsibility, but also capable of and willing to accept the responsibility morally, physically and financially.

The following questionnaire has been designed to help both you and _____ decide if you and/or your family are indeed adequately prepared to assume the type of responsible ownership we are endeavoring to assure for our adoptive pets. If there is not enough space to fully answer each question, please attach an additional sheet for your responses.

Name _____ Date _____

Name (co-applicant) _____

Address _____

City _____ Zip _____

Home Phone - Not cell or pager _____

E-mail Address _____

Place Of Employment (self) _____

Title/Department _____

How long have you been there? _____

Do you plan on changing jobs soon? Yes No

Business Phone (Self) - Not cell or pager _____

Place of Employment (co-applicant) _____

Title/Department _____

How long has she/he been there? _____

Does he/she plan on changing jobs soon? Yes No

Business Phone (co-applicant) - Not cell or pager _____

Best time to reach you _____

Where did you hear about us? _____

Questionnaire

List all the people who live in your home and their ages: _____

How long have you lived at your current address? _____

Do you plan to move within the next year? Yes No

If so, what will you do with your animal? _____

Why do you want a pet? _____

Is shedding a concern? Yes No Is noise a concern? Yes No

Indicate the energy level you are looking for in a pet: High Energy Medium Energy Couch Potato Doesn't matter

Who will be responsible for the care and cost of your new pet? _____

What other pets do you have? (Type) _____

Where do they sleep? _____

Are they Spayed/Neutered? Yes No Some Are

If you're animal(s) is/are not sterilized, please tell us why? _____

If your other pet is a dog, is it currently on heartworm preventative? Yes No

Do you have a fenced-in yard? Yes No Fence Height? _____ Type of fencing? _____

Are you willing to reinforce/repair your fence if needed? Yes No

If yard is not fenced, is there a *fenced-in* area nearby where you can regularly exercise your dog? Yes No

Describe that area and it's size: _____

Are you willing to have a home visit prior to adoption? Yes No

Do you travel much? Yes No If so, who will take care of your pet while you are away? _____

Under what circumstances would you have to give up your pet?

Moving New Baby Divorce Pet becomes ill Pet behavior Scratching Other _____ None

If you checked behavior or other, please explain: _____

How do you plan to train your pet? _____

Who will be responsible for the training of your pet? _____

How will you correct inappropriate behavior? _____

Are you willing to spend time training the dog to deal with problems such as jumping up, barking, pulling on the leash and/or separation anxiety?

Yes No N/A if adopting a cat

Are you considering taking your pet to a formal obedience class? Yes No N/A if adopting a cat

If necessary, are you willing to housetrain your new pet? Yes No

If the adoption counselor believes it is necessary, are you willing to purchase a dog crate or cat container? Yes No

If no, please explain why not: _____

Do you understand your new dog will need to be checked annually for heartworms and continue on monthly heartworm preventative? Yes No

Do you understand that your adopted pet will need periodic grooming to include: Brushing coat, trimming nails, ear cleaning and teeth cleaning? Yes No

Approximately how many hours a day will your pet be home alone? _____

Do you live in a: House Townhouse Condominium Apartment Mobile Home

If you rent or lease, do you have permission from your landlord to have a pet? Yes No

Landlord's Name _____ Landlord's Phone Number _____

Where will you keep your pet during the day when you are home? _____ When not at home? _____ At night? _____

Are you willing to keep a collar with a tag bearing your name, address and phone number on your pet at all times? Yes No

If, for any reason, you are unable to keep your pet, will you agree to return it to this adoption agent? Yes No

Are you willing to accept immediate and full responsibility for the ownership of your adopted pet, including all health care costs and necessary burdens and responsibilities of owning a pet? Yes No

Please list the pets you have owned in the past five years by name, breed, years in household, and reason for death or leaving?

Also, for those pets listed, please provide a vet reference if different from your current vet.

Name	Type	Breed	Yrs in home	Reason for death/leaving	Vet Reference
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

Adoption agent will be contacting the veterinarian(s) indicated on this application, are you ok with this? Yes No

Pets can live 12 to 15+ years, even longer depending on the breed/size. Can you commit to caring for them for this period of time? Yes No

Please complete the following section if you or your spouse is in the Military.

Military ID #: _____ Current Duty Station: _____

How long will you be in the Military? _____ Do you live in base housing? Yes No

How long have you been stationed here? _____ How much longer will you live here? _____

Do you have to complete a tour of duty overseas? Yes No If so, where will you be stationed, when will that take place? _____

What will you do with your pet if you are transferred overseas? _____

Are you expecting a state-side transfer? Yes No If so, when, where will you locate? _____

What will you do with your pet if you are transferred state-side? _____

Did you have pets at your last duty station? Yes No

Where are they now? _____

References: All applicants, please complete the following section:

Veterinarian's Name _____ Phone _____ Address _____

Please list two references that you have known for more than two years and who can speak to your ability and commitment to providing a long-term, loving home for your new pet. If you do not have a current veterinarian, list an extra reference in its place.

Personal Reference 1 Name _____

Personal Reference 1 Name _____

Address _____

Address _____

Phone: (Day) _____ Phone: (Evening) _____

Phone: (Day) _____ Phone: (Evening) _____

Estimate of Veterinary Costs:

Booster shots (DHLPP-C)	\$40-50 (yearly)
Rabies	\$12 (every three years)
Office Visits	\$20-30
Heartworm Check	\$21-22 (yearly)
6 months Heartworm Preventative	\$40-45*
6 months flea preventative	\$60*
Emergency Veterinary Hospital	\$50-100+ per visit
Premium dog food	\$20/month
Boarding Charges	\$15-25/day
FVR CPC	\$30-50 yearly
Feline Leukemia	\$40
Felv/FIV Test	\$26

**These prices are for a medium sized dog (40-60 lbs), prices do vary according to weight and vet.*

Signature:

NO GUARANTEES OR WARRANTIES OF HEALTH OR TEMPERAMENT CAN BE OR ARE MADE BY ADOPTER.

Adoption fees **DO NOT** cover the cost of caring and sheltering the animal you want to adopt. Adoption agent will not be responsible for any medical care required by an animal adopted from us. You may return an animal for health reasons but a refund on the adoption fee **WILL NOT** be given unless the return occurs within the first two (2) days following the adoption and your veterinarian had advised us of a medical condition identified during that two (2) day period. We hope this information doesn't discourage you from adopting from us but reminds you that love comes with no guarantee.

Anyone who adopts a dog or cat from an Animal Shelter, Rescue Agency or Humane Society is required by law to have the animal sterilized if it hasn't already been done. Anyone who violates this requirement is subject to civil penalties and may be required to meet their legal obligations under sections 3.2-6574 et seq of the Code of Virginia.

- *I understand that submitting an application does not guarantee that I will receive approval to adopt a pet from adoption agent.*
- *I certify that all information on the Adoption Application is true and correct.*

Name of Animal: _____

Return Application To: _____

Sponsor Signature: _____

Signature: _____

Signature (co-applicant): _____