

ADOPTION APPLICATION

Date: _____

Receipt # _____

Name _____ Age _____
(last) (first) (mi)

Complete Address (Street, city, state, zip) _____

E-mail Address _____

Home Phone _____

Cell Phone _____

DL# _____

Place of Employment _____

Address/Phone of employer _____

Do you own _____ rent _____ your home? How long have you lived at this address? _____

If less than a year please give previous address _____

If you rent, are you allowed to have pets? _____ Landlord name and phone number _____

Will this pet be kept inside or outside? _____ Do you have a fenced-in yard? _____

If not, how will you contain an outdoor pet? _____

Number of children in home _____ Ages of children _____

What type of pets? _____

Do you currently own any pets? _____ If no, have you previously had any pets? _____ What type? _____

If yes, how many? _____ How many of these are Dogs? _____ Cats? _____

What are their names and ages and are they spayed or neutered?

If your pets are NOT spayed or neutered, please explain why.

What kind of identification do your pets have? _____

Who is your family veterinarian? _____ Phone _____

May we contact your veterinarian? Yes _____ No _____

Have your pets been tested for heartworms? _____ What kind of heartworm preventative is your pet taking?

Have your cats been tested for feline leukemia and FIV? _____

How do you feel about having a pet spayed or neutered? _____

Why do you want to adopt a pet from the Humane Society of Etowah County?

Please explain what you believe is a pet owner's responsibility.

Any comments about the Humane Society of Etowah County? _____

Emergency contact name, address and phone number _____

*** I certify that all information contained herein is true and acknowledge that giving false information will void the adoption.

Signed _____

Approved _____ Disapproved _____ Reason for Disapproved _____

FOR STAFF USE ONLY:

