



ADOPTION APPLICATION

Applicant info

Desired dog: _____ Date: _____

Your Name: _____ Name of Spouse (if applicable): _____

Address: _____

Phone Number: _____ Best time to call: _____

Email address: _____

Ages of children in your home: _____

Does anyone reside in your home besides spouse and children? _____

Home Info

Do you rent or own? _____

If renting, do you have permission from landlord to own pets? Yes No

Is your home a: House Apartment Condo Mobile Home Other: _____

What would you do with your pets if you moved and could not keep them? _____

Do you have a fence around your yard? Yes No (If yes, how tall? ___ft)

Pet Relationship and Lifestyle

How many hours a day will your pet be left alone? _____ hours

Where will your dog be kept while no one is home? _____

Where will your pet sleep at night? _____

How will your pet be exercised? _____

How would you describe your current lifestyle? Very Active Average active Not Active

What pets do you currently have (species, breed, age)? _____

Are your pets current on vaccinations? Yes No

Signature of applicant: _____

Please note: Completing this application does not guarantee you will be approved to adopt the animal for which you are applying.