4000 Industrial Rd

Wickenburg, AZ 85390

Phone: 928-684-8801

Fax: 928-684-5480

**Adoption Application**

Name:

Primary Phone:                                                                          Secondary Phone:

Email Address:

Physical Address:

City:                                                                State:                                                                  Zip:

Mailing Address:

City:                                                                State:                                                                   Zip:

Date of Birth:

**Residential Status**

[ ] Own Home [ ] Rent Home [ ] With Relatives/Friends

What kind of home is it? (Apartment, townhouse, house, condo)

If you rent your home, do you have your landlord’s written permission to have an animal?

Name of property/landlord:

Phone number of landlord:

Have they been notified you are planning to get a pet?

Has your landlord specified any breed exclusions?

Does your landlord require an additional deposit?

|  |  |  |
| --- | --- | --- |
| **Name**  | **Relationship** | **Age (if under 18)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Household Information**

Does everyone in your household approve of adopting an additional pet?

Does anyone in your household have pet allergies?                                                If yes, please describe:

Do you allow a HSW representative do a pre-adoption and post-adoption home visit if deemed necessary?

Do you have a yard?                                                             Do you have a secure fence?

What type of fence?                                                             What is its height?

Where will your new pet be kept? Primarily Indoor/Primarily Outdoor/Indoor Only/Outdoor Only

Amount of time alone daily?                                                Amount of time outside daily?

**Pet History**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name**  | **Breed** | **Age** | **Still In Home** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**References**

Have you ever owned a pet that has bit someone?

|  |  |
| --- | --- |
| Reference Name |  |
| Phone number |  |
| Occupation |  |
| Relationship to you  |  |

Have you ever had any litigation against you and your past animals?

If yes, please explain:

How often will your pet visit the veterinarian? Annually? Every 3 years for shots? As needed?

What is the name of your clinic?

Have you ever had to relinquish a pet? If yes, please explain:

Are all of your past/current pets spayed/neutered?                             Are they up to date on vaccinations?

Are you ready for a possible 20 year commitment?

Can you financially afford the veterinarian costs of your new pet?

Under what circumstances would you not keep this pet? [ ] new baby [ ] moving [ ] chewing [ ] housetraining problems [ ] barking

[ ] allergies [ ] pet became ill [ ] pets didn’t get along [ ] grew too big [ ] would not give up for any of the above [ ] other

If other, please explain

Why are you considering adopting a pet?

If you are interested in a particular pet, who is it and what attract you to it?

**Signature of Potential Adopter**

**HSW Signature**

**Date:**

**Please be advised:**

* **Filling out the Adoption Contract does not guarantee approval.**
* **HSW reserves the right to refuse any adoptions**
* **All donations collected by HSW at the time of adoption provide for the health and welfare of all our shelter animals. Many shelter animals need additional training. Shelter animals need love, patience and an understanding adopter who realizes that they are having to make an adjustment to a new environment and it takes time.**