



Fur Keeps Animal Rescue, Inc. Adoption Application

Please fill out all 5 pages of this application as completely as possible. We understand that some questions are breed-specific and may not apply to the animal you are adopting. Others may not pertain to your current situation. (Example: You would not have a Vet reference if you have never owned a pet.) All others questions should be answered to the best of your ability.

Application for: (Pet's Name)

Applicant's Last Name:

Pet Type: Cat Dog Horse

Pet's Sex: Male Female

Applicant/Co-Applicant Information

Last Name:

First Name:

DOB:

Last Name:

First Name:

DOB:

Address:

Apartment #:

City:

State:

Zip Code:

Do you own? Rent? If renting, do you have the Landlords permission to keep this pet? Yes No

How long at this address?

Home phone:

Cell phone:

Landlord's/Condo board's name:

Phone:

E-mail Address:

Applicant Drivers License Number:

How were you referred to Fur Keeps Animal Rescue?

Family/Household Information

Number of adults in the household:

Relationships:

Have all the adults in the household agreed to this adoption? Yes No

Number of children in the household:

Ages of children:

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Is anyone in the household allergic to pets? <input type="checkbox"/> Yes <input type="checkbox"/> No		Who?
Have the children had pets before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type?		
Why would you like to adopt an animal from us? (Check all that apply)		
<input type="checkbox"/> Companion for self	<input type="checkbox"/> Gift	
<input type="checkbox"/> Companion for child	<input type="checkbox"/> Watch pet	
<input type="checkbox"/> Companion for another pet		
<input type="checkbox"/> Companion for another household member		
What activities would you do with your new pet:		
Obedience:		
Agility:		
Flyball:		
Other:		
Employment Information		
Applicant Employer:		Position held:
Address:		
City:	State:	Zip Code:
How long have you been with this employer?		Work Phone:
Co-Applicant Employer:		Position held:
Address:		
City:	State:	Zip Code:
How long have you been with this employer?		Work Phone:

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Personal Reference Information

Please provide 3 personal references other than a family member

Name:

Phone Number:

Name:

Phone Number:

Name:

Phone Number:

Professional Reference Information

Please provide 3 professional references other than a family member

Name:

Phone Number:

Name:

Phone Number:

Name:

Phone Number:

Trainer Information

Name:

Phone Number:

Pet Information

Have you had pets in the past or do you currently have pets? Please tell us about them

Name	Breed	Age	Gender	Altered	Where are they?
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	

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Have you ever lost a pet, surrendered a pet to a shelter/rescue, given a pet away, or placed a pet in another home? Yes No

If yes, what were the circumstances? (Be as specific as possible.)

Veterinarian Information

Veterinarian's Name:

Veterinarian's Phone:

When was your current pet's last visit to a veterinarian and why?

Secondary Veterinarian's Name:

Veterinarian's Phone:

Have your current or previous pets been kept up-to-date on annual vaccines and tested for heartworm?

Yes No

Are your current pets on heartworm preventative? Yes No If yes, what kind?

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New Pet Information

How long have you been looking for a pet?

What will you feed your new pet?

How often will you feed your new pet?

How much time are you prepared to allow for your new pet to adjust to your home?

Are you able to afford a bill of \$400 - \$1000 (or more) for emergency veterinary care? Yes No

How much do you expect to spend on maintenance for your pet in a year?

Are you committed to providing a responsible home for your pet's entire life? (15+ years) Yes No

If you have to move, what do you plan to do with your pet(s)?

Who in the household will be the pet's primary care giver?

Where will the pet be kept during the day?

During the night?

How many times per day do you plan to take your pet outside?

How do you plan to house train your pet?

Do you have a fenced in yard? Yes No If yes, what size and what type?

How many hours per day will your pet be left alone?

What would you do if your pet develops a problem with:

Digging:

Barking:

Chewing:

Aggression:

By signing below, I certify that the information I have given is true. I understand that Fur Keeps Animal Rescue, Inc. reserves the right to deny my application for any reason and has the right to reclaim an animal following an adoption if unsuitable home conditions, misrepresentation of self, evidence of neglect, abuse or other mistreatment of the animal(s) are found. I further authorize the investigation of any and all statements made in this application.

Signatures

Applicant:

Date:

Co-Applicant:

Date:

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Please do not write in the space below:

Adoption interviewed by:	Date:
Application approved for:	Date:
ID:	

Fur Keeps Animal Rescue, Inc. provides the best medical care for all pets that come into our organization.

Each animal is examined by a veterinarian; heartworm tested; spayed/neutered according to the age of the canine/feline.

Dogs are vaccinated for Distemper, Rabies, and Bordatella.

Equivalent vaccines are given to all feline, equine, and other animals that come into FKAR.

Our animals are also given advanced medical attention and treatment such as surgery if needed.

All animals are microchipped.

All potential adoptive families must complete our adoption screening process which includes an adoption form and contract; personal reference check; and home visit.

Home or apartment renters are required to provide proof of lease and permission from the landlord that pets are permitted in the residence.

Adopters must be at least 21 years of age.

Post-adoption, FKAR follows up with all adoptive families and is continuously available for consultation and guidance regarding our animals.

FKAR also offers Pet Nutrition counseling with a Pet Nutritionist.