



The Baum Shelter
(903) 768-3230
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TheBaumShelter.org

Animal Adoption Application

Desired Adoptable Animal: _____

First Name _____ Last Name _____

Phone _____ Email _____

Address _____

City _____ State/Province _____ Zip _____

Occupation _____

Name of Spouse / Partner:

First Name _____ Last Name _____

Children (with ages) _____

Please Circle One:

Is your home a(n):

House

Condo

Apartment

Do you rent or own?

Rent

Own

Provide Landlord's name and number:

List any additional people in household:

Has anyone in your household experienced allergies or asthma?

Why are you looking to adopt a dog?

Who will be responsible for the dog's care (feeding, exercise, training, potty walks, vet visits, socialization etc)?

Are you prepared to care for this dog for it's life span of 10-15 years?

Who will provide for your pet in the event that you become ill or unable to care for him/her?

Do you have any of the following (Please check all that apply)?:

Dog door Patio Balcony Yard

Swimming pool None of these

Do you have a fence?

Yes

No

Describe your fence including all heights, materials, gates/openings.

Is the fence intact on all sides? Yes No

Are there locks at each gated opening? Yes No

Where will your dog sleep at night?

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

Where will (s)he be left alone? _____

How often will your dog be exercised? (not including short potty walks)

Will this be your first pet?

Yes

No

Please list pets you've previously owned (type, age):

What happened to pets previously owned? If deceased, please list cause of death.

Do you have any other pets in your home? *

Yes

No

Please list names, types, ages of current pets in home:

Do you have a veterinarian?

Yes

No

Provide us with your veterinarian's name, locations and phone number.

If you currently have dogs/cats, are they spayed/neutered?

Yes

No

No pets

Are your pet's vaccinations up-to-date?

Yes

No

No pets

When was their last visit to the veterinarian?

Are you prepared to cover any vet expenses that you may incur throughout your dog's life?

Yes

No

If yes, is there a limit to vet expenses over your pet's lifetime? If so, what is the limit? _____

Do you plan on purchasing pet insurance?

Yes

No

Maybe

How do you plan on keeping your new pet's teeth clean?

What traits are you looking for in a dog?

Are there any behaviors that would be unacceptable to you?

How do you plan on training your dog?

Would you be willing to hire a professional trainer to help with any major behavioral issue?

What amount of time do you think is reasonable for your dog to adjust to you and your home?

What will you do with your new dog if the following 7 situation occurred?

1) You move to a new home that does not allow pets?

2) You move to a new home that does not allow pets?

3) You get married? (if you're single)

4) A new boyfriend/girlfriend is allergic to dogs?

5) You travel?

6) You move locally?

7) Move out of state or country?

Under what circumstances would you not be able to keep this dog?

- Pregnancy/Baby Divorce/Separation
- Spouse/child is allergic Needs too much attention
- Job change/loss Dog bites people Destroys household items
- Behavioral problems Expensive vet bills
- Conflicts with other pets Dog is untrainable
- Needs special diet Dog becomes disabled
- Requires daily treatment Other

If you chose "other", please explain:

If you have to give up this dog for any of the above checked reasons, what will you do with the dog?

Were you ever in a situation where you were not able to keep a pet?

Yes

No

If you answered yes, please explain:

Are you willing to have a Baum Shelter representative visit your home?

Yes

No

I certify that all of the above information is true and accurate. I understand that if I adopt a pet from the Baum Shelter Limited, this document will become part of the adoption record. I also understand that completion of this questionnaire does not guarantee the adoption of a Baum Shelter animal.

Applicant's Signature:

Date:

Baum Shelter Representative Witness:

Date:
