

des moines county
HUMANE SOCIETY

ADOPTION APPLICATION – Pet Applying For _____

Name: _____ DL or ID # _____
Address: _____ City/State/Zip _____
Phone Numbers: Home: _____ Cell: _____
Email Address: _____

Do you: Own _____ Rent _____
If Renting - Landlord: Name _____ Phone Number _____
How Long at Address: _____
Home/Renter's Insurance Agent: _____ **Insurance Agent Phone #:** _____
Do you have Children?: _____ **If so, ages:** _____
Adopted from DMCHS Previously? _____ **If yes, what year:** _____

Employer: _____
Work Phone Number: _____
How Long: _____

Veterinarian: _____
Phone Number _____

2 Personal References – NON RELATED:

Name: _____
Address: _____
Phone Number: _____

Name: _____
Address: _____
Phone Number: _____

Do you have a fenced in yard? _____ **If no, any plans to install?** _____

Other Pets (past and current):

Type _____ Name _____ Reason If No Longer Have _____
Type _____ Name _____ Reason If No Longer Have _____
Type _____ Name _____ Reason If No Longer Have _____

I have answered the questions truthfully and agree to allow the Des Moines County Humane Society to contact my veterinarian, personal references, employer, and insurance agent listed on this application. I understand that the DMCHS may refuse or deny my application for adoption for any reason. If email address provided: "The DMCHS uses your email address strictly to provide you with the Tailwagger and other important information concerning events and promotions concerning the Humane Society. The Society does not and will not release or share your email information."

My signature below indicates I am the person responsible for the care and well-being of the animal I adopt, and **if for any reason I cannot keep the adopted animal, I will surrender it back to the DMCHS.**

Applicants Signature _____ Date _____

DMCHS Employee Who Accepted Application _____
(updated 1/3/18)