

STAFF USE ONLY:
 Date Application Received: _____ Time: _____
 Received by: _____

PO Box 6116 McKinney, TX 75071 * Email: info@muttsandmayhem.org * Web: www.muttsandmayhem.org * Federal Tax ID# 46-3904233

ADOPTION APPLICATION

Prior to the adoption of an animal, we ask that you complete this application. This information will help Mutts & Mayhem achieve its goal of finding permanent, responsible, loving homes for the animals in our care and allow Mutts & Mayhem to better assist you in finding a pet suited to your needs. **Please be sure that each applicant initials each page at the bottom and signs the signature page.**


Date of Application: _____

Animal(s) you are interested in adopting (leave blank if there isn't a specific animal just yet):

Animal Name: _____ **Species (Circle One):** Dog / Cat **MMESAR Animal ID:** _____

Animal Name: _____ **Species (Circle One):** Dog / Cat **MMESAR Animal ID:** _____

Why do you want to adopt this pet(s)?

 **Your Information:** *Please Print Legibly & List ALL adults living in your household. Please do not provide work or school email addresses as those may easily change over time.*

Home Address: _____ City: _____ State: _____ Zip: _____

How many total adults in your home? _____ How many children? _____ Children's' ages? _____

Adult Applicant #1 Name: _____

Driver's License #: _____ State: _____ Date Issued: _____ Exp Date: _____

Date of Birth: _____ Email Address: _____

Cell Phone () _____ Alternate Phone () _____ Hm__ Wk__ Other__

Adult Applicant #2 Name: _____

Driver's License #: _____ State: _____ Date Issued: _____ Exp Date: _____

Date of Birth: _____ Email Address: _____

Cell Phone () _____ Alternate Phone () _____ Hm__ Wk__ Other__

Adult Applicant #3 Name: _____

Driver's License #: _____ State: _____ Date Issued: _____ Exp Date: _____

Date of Birth: _____ Email Address: _____

Cell Phone () _____ Alternate Phone () _____ Hm__ Wk__ Other__



Microchip Identification Registration – Emergency Contact:

Each of our rescue animals are implanted with microchip identification that is good for the entire life of your pet. Immediately after adoption, we register your pets’ microchip into your name using **Applicant #1’s** information. Please provide an emergency contact that you would like to be registered with your adopted pets’ microchip in the event you cannot be reached. **PLEASE DO NOT LIST YOURSELF OR OTHER APPLICANTS FROM PAGE 1 HERE.**

Emergency Contact Name: _____

Cell Phone () _____ Alternate Phone () _____ Hm__ Wk__ Other__



To be considered for adoption you need to:

- Be at least 18 years old.
- Have knowledge and consent of all adults living in your household
- Have a valid government-issued photo ID
- Have landlords consent to bring an animal onto the property (if applicable)
- Possess zero criminal convictions for Animal Cruelty, Animal Abuse, Family/Domestic Violence or Felony Violent Crimes.
- Understand that Mutts & Mayhem reserves the right to refuse the adoption of any animal to any person.



Your Home:

Do you: ___ Own ___ Rent ___ Other (please explain): _____

If you do not own your home, are you allowed to have animals where you live? ___ Yes ___ No Don't know

If you rent, are there weight/size or breed restrictions? Yes No Don't know N/A _____

If you rent, is there a pet deposit and/or monthly pet rent? Yes No Don't know N/A _____

If you rent, please provide your landlord’s name and phone number:

Are you planning on moving in the next 6 months? Yes No

Will you allow a home visit to ensure that your home is appropriate for adoption? Yes No

Do you have a fenced yard? Yes (How high is the fence? _____) No

Does anyone in the household have animal allergies? Yes No

If yes, how do you plan to manage this issue? _____

Where will your new pet(s) be when you are home? _____

Where will your new pet(s) be when you are **not** home? _____

How many hours each day are you typically away from home? _____

Are you familiar with the animal laws and animal limits in your town/city? Yes ___ No ___ If Yes, what are they?

Our rescue animals are intended to be adopted as companion animals where most of their time is spent living indoors with his/her owners living among them. Do you intend to keep your pet indoors or outdoors?

Indoors Only Outdoors Both

If Outdoors or Both, please explain:



Your Current Pets:

How many DOGS do you currently have? _____

What are their breeds and ages? _____

How many CATS do you currently have? _____

What are their breeds and ages? _____

Veterinarian Name: _____ / (Phone) _____

Are your resident pets' current on their vaccinations? Yes ___ No ___ N/A ___

**Resident Dogs should have a Rabies vaccination record/certificate and Heartworm test results within the past 12 months*

**Resident Cats should have an FeLV (feline leukemia) and FIV (feline immunodeficiency virus) test results within the past 12 months*

Are all of your resident dogs on monthly heartworm preventative? Yes ___ No ___ N/A ___

Are all of your resident dogs on monthly flea/tick preventative? Yes ___ No ___ N/A ___

Are all of your resident cats on monthly flea/tick preventative? Yes ___ No ___ N/A ___

Have any of your resident pets ever had a litter (had babies) before? Yes ___ No ___ N/A ___

Have you ever given up or surrendered a pet to a Shelter? Yes ___ No ___

If yes, what were the circumstances that led to your surrender?

Because so many rescue animals have unknown medical histories, a quarantine period may be recommended if you have other pets at home. Do you have a safe place to keep your new pet(s) separate from resident animals for the short term and long term if needed (E.g. cage for confinement or separate area in house such as a laundry or spare room)?

Yes ___ No ___ (If yes, where? _____)

What methods will you use to housebreak your new pet(s), if needed? _____



Questionnaire:

Have you ever had an animal in your home with a contagious disease?

Example Dogs: External Parasites (Ticks, Fleas, Mange), Bordetella (Kennel Cough), Canine Parvovirus (Parvo), Canine Distemper, Canine Influenza (Dog Flu), Ringworm

Example Cats: Feline panleukopenia (Feline distemper), Feline herpesvirus infection, Feline calicivirus infection, Feline leukemia (FeLV), Feline immunodeficiency virus (FIV) infection, Heartworm disease, Intestinal worms (roundworms, hookworms, whipworms, tapeworms, etc.

___ Yes ___ No (if Yes, please give details) _____

All pets making the transition from a shelter or rescue to a new home need time to adjust to a new family and may require housetraining and behavior training. Are you willing to provide any needed training? Yes ___ No ___

Information regarding the history, health and behavior of adopted rescue animals may not be available or accurate.

What behavior would you be unwilling to work with? _____

Declawing of cats 6 months of age and older and/or over 5 pounds, is strictly forbidden after adopting the rescue animal from Mutts & Mayhem. Are you willing to enter into this agreement? Yes ___ No ___

Can you afford veterinary care, necessary grooming, emergency expenses, supplies and food for the lifetime of this pet? (These expenses can often add up to hundreds of dollars each year.) Yes ___ No ___

Mutts & Mayhem has vested love, advocacy and money in each animal we rescue. It is our mission to ensure that these animals are forever loved and cared for and have food and shelter. For this reason, should you not be able to keep your adopted rescue animal for *any* reason, we will always accept an adopted animal returned to us, no questions asked. No matter the circumstance and no matter how long after adoption.

What reasons might cause you to return this pet? _____

Have you ever adopted a pet from Mutts & Mayhem Animal Rescue? ___ Yes ___ No

If yes, who/when? _____ Where is this pet now? _____

Have you ever surrendered an animal to Mutts & Mayhem Animal Rescue? Yes No

If yes, why? _____

How did you hear about Mutts & Mayhem? _____

What topics would you like more information about?

- House Training Scratching Furniture Chewing (dogs) Dogs & Kids Obedience Training
 Introducing Cats Introducing Dog/Cat Separation Anxiety Licensing/City Ordinances



By signing below, I (we) certify that the information I have given is accurate and complete.



I (we) understand that MMAR performs a thorough review of my application which may include identification checks, reference checks, criminal background checks, residential history check and other verifications in order to ensure safe placement of the rescue animal(s)



I (we) also understand that a valid government issued identification or Driver's License will need to be presented to a Mutts & Mayhem representative at the time of adoption and that all parties contained in this application must be present at the time of adoption.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

MUTTS & MAYHEM OFFICE USE ONLY

In-Home Visit Date: _____

In-Home Visit Completed By: _____

Home Visit Checklist completed and attached to application By: _____

ALL Driver's License(s) or Government ID(s) Verified & Copied By: _____

Resident Pet Vaccinations Verified & Copies Obtained By: _____

Veterinarian Information Verified By: _____

APPROVED for Adoption: YES NO

*If Adoption is **denied**, please explain:*

Approved/Denied By: _____ Signature: _____

Adoption Interview Notes:

"Their Hope... Our Mission"