

Peckin' Thyme Farms Adoption Application

Name _____ Age _____
Street Address _____
City _____ State _____ Zip _____
Phone _____
Email address _____

Please list the other people living in the household:

Male ___ Female ___ Age _____ Male ___ Female ___ Age _____
Male ___ Female ___ Age _____ Male ___ Female ___ Age _____

Does anyone in your household have allergies or may be allergic to pets? Yes _____ No _____

Who are you adopting this animal for? Self _____ Child _____ Other _____

Have you ever been denied from adopting an animal from another shelter/ rescue?

Yes _____ No _____ If yes, please explain _____

How long have you lived at this residence? _____ Months _____ Years

Do you own your home or rent? Own _____ Rent _____

What type of residence do you live in?

House _____ Townhouse _____ Condo/Co-op _____ Apartment _____ Trailer _____ Other _____

If you are renting, are you allowed to have pets? Yes _____ No _____

Please provide your landlord's contact information so we may verify that you are allowed to have a pet(s) in your home.

Name _____ Phone _____

Veterinarian Information & Animal History

Veterinarian Name _____ Phone _____

If you have used other veterinarians in the past please list them below:

Other pets in the household:

_____ # of dogs _____ # of cats Other pets: _____