



230 Eldridge Street  
Burlington, CO 80807  
epawaburlington@gmail.com

OFFICE USE ONLY:

Animal Name: \_\_\_\_\_

EPAWA ID#: \_\_\_\_\_

Foster: \_\_\_\_\_

Application Approved: \_\_\_\_\_

Fee Collected: \_\_\_\_\_

Date of Adoption: \_\_\_\_\_

## ADOPTION APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Employment \_\_\_\_\_ Employer name/phone \_\_\_\_\_

### ABOUT THE HOME:

Type of residence: House      Mobile home      Apartment      Condo

Own your home: \_\_\_\_\_ Rent: \_\_\_\_\_ Live with parents \_\_\_\_\_ Other: \_\_\_\_\_

If renting apartment, name of Apartment: \_\_\_\_\_

Landlord name and phone number: \_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Any plans to move in the next few years?      Yes      No

What would you do in you moved to a residence where dogs are not permitted?

Fenced yard? Yes      No      How tall is your fence? \_\_\_\_\_

### **ABOUT THE FAMILY:**

How many adults in the home? \_\_\_\_\_ How many children? \_\_\_\_\_

Are all family members in agreement about getting a pet? Yes No

Is anyone in the home fearful of dogs? Yes No

Is anyone in the home allergic to dogs? Yes No

Who will be the primary caregiver? \_\_\_\_\_

Who will be financially responsible for the pet? \_\_\_\_\_

How would you describe the activity level and noise level of the home?

How often do you travel? \_\_\_\_\_

How will you have your dog cared for while you're away?

In the event of an emergency what kinds of arrangements do you have in place and who will care for your pet? \_\_\_\_\_

How many hours will dog be alone during the day? \_\_\_\_\_

### **ABOUT CURRENT PETS:**

Please list all current pets:

Name	Species	Breed	Gender	Spayed or Neutered?	Vaccinated
_____				Yes No	Yes No
_____				Yes No	Yes No
_____				Yes No	Yes No
_____				Yes No	Yes No
_____				Yes No	Yes No

Do your cats get along with dogs? Yes No

Do your dog(s) get along with other dogs? Yes No

Do your current pets have any medical or behavioral problems?

Yes No

If yes, please explain:

Who is your current veterinarian?

(Your veterinarian may be contacted as a reference)

### PET HISTORY:

Have you ever rescued a pet?

Yes No

Has your family have any past experience owning a dog?

Yes No

Have you ever, circle all that apply:

Given a pet away

Given a pet to a shelter

Sold a pet

Have you ever had a pet for a short period of time and it didn't work out?

Yes No

Have you ever had a pet that has given birth?

Yes No

### PLANS FOR YOUR NEW PET:

Why do you want to adopt a pet?

Companionship

Watch dog

Other

If other, please explain:

Where will your pet live?

Indoors mostly

Outdoors mostly

Outdoors only

Not sure

Where will your pet be when nobody is home?

Indoors

Outdoors

Not sure

Are you aware that some pets require week or sometimes months to adjust to a new home/family/environment/other pets?

Yes

No

Are you prepared to allow for that adjustment period?

Yes

No

Are you willing to bring a pet to your veterinarian for yearly exams and vaccinations as recommended by your veterinarian?

Yes

No

Are you willing/able to pay for emergency care that could result in a bill that could cost \$200-\$1,000 or more?

Yes

No

Are you willing to pay for pet expenses including veterinary care, supplies, toys, boarding/pet sitting, food, grooming, etc.?

Yes

No

Will you commit to providing a pet a home for its entire life?

Yes

No



If your pet exhibits behavioral or adjustment problems, how do you plan to handle this situation? Discipline, but not harshly

Anything else you would like to share with us?

Please list 3 personal references:

Name

Phone number

Relationship

By signing below I certify that:

The information I have given is accurate

I understand that EPAWA has the right to deny any application

I give permission for a representative of EPAWA to call the references and veterinary practices I have listed

I understand that a home inspection may be required prior to adoption

\_\_\_\_\_(Please Initial) I confirm that I have received the rabies information and hand-out from EPAWA along with my adoption application.

\_\_\_\_\_(Please Initial) I confirm that all medical/treatment records pertaining to the animal being adopted are disclosed to me upon adoption.

Signature

Date

## **WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT FOR ADOPTION of EPAWA Felines and Canines**

1. In consideration for being allowed to adopt \_\_\_\_\_, an EPAWA Canine, I hereby **RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO HOLD RESPONSIBLE EPAWA, The State of Colorado, their officers, agents, servants, volunteers, or employees (hereinafter referred to as RELEASEES)** from any and all liability, claims, demands, actions, including court costs and attorney fees, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, my family, or any of the property belonging to me.
2. By adopting said canine I **VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH**, that may be sustained by me, or any loss or damage of property owned by me, as a result of adopting said canine, **WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE**.
3. It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a **RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO HOLD RESPONSIBLE** the above-named **RELEASEES**. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Colorado.
4. **IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.**

Signed on this \_\_\_\_\_ day of, \_\_\_\_\_

**Participant/Adopter**

**Printed Name, Address, Phone Number**

\_\_\_\_\_

**Signature**

\_\_\_\_\_