

Adoption Form



YOUR CONTACT INFORMATION

First Name		Last Name	
Address			
City/State		Zipcode	
Phone		Email	

YOUR HOME

What type of housing do you live in?

☐ Apartment	☐ House	☐ Others, _____
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Do you rent this property? If yes, fill the landlord name

☐ No	☐ Yes, Landlord's Name	
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GENERAL INFORMATION

Why do you want to adopt this pet?

☐ House pet
☐ Breeding
☐ Others, _____

Have you previously owned a pet reptile?

☐ No	☐ Yes
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Please provide 3 personal references:

Name and phone number of current veterinarian :

**Do you have proper setup (enclosure, heat pad, thermostat etc.) for the animal?
Explain below**

I hereby agree to adopt the animal and take proper care of them. If I can not take proper care of them I will surrender the animal back to Morphs & Milestones.

Signature _____

Landlord Signature and phone number if applicable:

Pet ID#		
Type of reptiles		
Age / Sex		M / F
Approved	Yes / No	
Date		