

**Adoption Application**

Date:\_\_\_\_\_\_\_\_\_\_

Name of animal interested in (if applicable):\_\_\_\_\_\_\_\_\_\_\_ Dog\_\_\_\_\_Cat\_\_\_\_\_\_(check one)

Applicants Name:(Print legibly) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Street)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(City)\_\_\_\_\_\_\_\_\_(State)

Phone Number:\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you Rent or Own (circle one) If you rent please list contact information for Landlord or Development Manager:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name and number)

Current Animals: (please fill this section out in detail)

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_ M/F:\_\_\_ Fixed:\_\_\_\_\_\_

Vaccine History:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_ M/F:\_\_\_ Fixed:\_\_\_\_\_\_

Vaccine History:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_ M/F:\_\_\_ Fixed:\_\_\_\_\_\_

Vaccine History:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_ M/F:\_\_\_ Fixed:\_\_\_\_\_\_

Vaccine History:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have dogs, are they on heartworm preventative? (yes or no) Please list the preventative:\_\_\_\_\_\_\_\_

Is your yard fenced in? Yes\_\_\_ No\_\_\_\_ If so, how high is it?\_\_\_\_\_\_\_\_\_\_

Where will the animals live during the day?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will the animals sleep at night?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever relinquished an animal over to Animal Control, shelter or re-homed and animal?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If so, why?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many pets have you owned in the past 10 years?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list the Veterinarian we may contact for those animals:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name/Number)

Do you have a current Veterinarian? Yes\_\_\_\_ No\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If not, who will you use?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you considered the expense of this animal, both routine and unexpected illness? Yes\_\_\_ No\_\_\_

Do you have any children living in the home? Yes\_\_\_ No\_\_\_\_ If yes, how many and how old are they?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do children visit your home? Yes\_\_\_ No\_\_\_ If yes, how often?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If interested in adopting a cat, do you plan to declaw this cat? Yes\_\_\_\_\_\_No\_\_\_\_\_\_\_

Are you aware of the leash laws in PA and that you MUST have control of your pet at all times? Yes\_\_ No\_\_ Are you aware that ALL cats and dogs over 3 months of age MUST have a current rabies vaccine in PA? Yes\_\_ No\_\_ Are you aware that ALL dogs over 3 months of age MUST be licensed in PA? Yes\_\_ No\_\_

Are you 21 years of age? Yes\_\_ No\_\_\_

Applicant Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Please allow 24 hours upon receipt of the application to be reviewed before a rescue representative call you back\*