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If you do not save it, the form will be blank and cannot be processed.**



FRIENDS OF THE FRIENDLESS
P .0. Box 411, Lexington, MO 64067
lexingtonsaveanimals@yahoo.com



ADOPTION APPLICATION

A completed application is required for all adoptions! If you are not selected for a certain pet, your application will remain on file and, if approved, will expedite any future adoption interest. In order for you to be considered for adoption you must:

- Be 21 years of age.
- Have knowledge and consent of all adults living in your household.
- Have a valid ID and proof of current address.
- If renting, have consent of your landlord for a pet. This WILL be checked!

By my signature, I certify that the information given is true and correct and I recognize that any misrepresentation of facts will result in the denial of my application. I also give my veterinarian permission to release any vet care records or information about my current and past pets to Friends of the Friendless. I understand that by having an approved application on file does not guarantee specific adoptions. Friends of the Friendless retains all rights to deny a request if my approved application to adopt is not in the best interest of that animal.

Name of animal you are interested in: _____

Today's date: _____

Your full legal name: _____

Address: _____

City/State/Zip: _____

Date of birth: _____

Names/ Ages of all persons living in your home: _____

Phone number: _____ Best time to contact you: _____

Email address: _____

Employer: _____

Employer's phone number: _____ How long have you been at this job? _____

Do you rent or own? _____ How long at current address? _____

If renting, name and phone number of land lord: _____

Apartment/House/Duplex/Trailer? _____ Fenced back yard? _____

If you have lived less than one year at this address, what was your previous address? _____

How long at the previous address? _____ Planning on moving soon? _____

If yes, please explain: _____

Current pets in your home: _____

Are your current pets spayed/neutered, UTD on shots? _____

Vet name and number: _____

How often will this pet be exercised? _____

Describe housetraining or behavior correction techniques: _____

Will this pet be primarily indoor or outdoor? _____

If outdoor, what safeguards are in place during inclement weather? _____

Please initial that you understand that an adopted pet from FOF can never be chained to anything outside for any other purpose than to potty and cannot be for longer than 1 hour in duration. If chained briefly, you acknowledge the pet still will have access to fresh water, food and shelter. By initialing, you are acknowledging you understand this condition and should FOF or Animal Control be notified the pet is being chained outside for extended periods of time, the animal is subject to being seized by Animal Control and returned to FOF. _____

Your pet may well live over 14 years old. Are you prepared to financially and emotionally make that commitment to a pet? Yes ___ No ___

If you are experiencing behavioral issues with a pet, are you willing to contact FOF to have a volunteer assist you with the issue before surrendering the animal? Yes ___ No ___

By signing this application, I understand that should I no longer be able to care for my pet, FOF will be notified and advised of plans for the pet or for return to FOF. Our pets cannot be rehomed without our permission.

Printed name

Signature

Date of application: _____

To be completed by Friends of the Friendless Volunteer

Application receipt date: _____ Accepted/Denied: _____

Reason for denial if applicable: _____

Name of person reviewing the application: _____