

# Adoption Application



Name of pet(s) you are interested in adopting:

\_\_\_\_\_

## Personal Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Prior Address (if less than 1 year) \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone \_\_\_\_\_

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

How long have you lived at your current address?

\_\_\_\_\_ Years \_\_\_\_\_ Months

Do you rent or own? \_\_\_\_\_ Rent \_\_\_\_\_ Own

If you rent, provide Landlord name, address and phone:

\_\_\_\_\_

Do you have permission from your landlord to get a dog?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Are you aware of pet deposit and monthly fees (if any) required?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have a fenced yard? \_\_\_\_\_ Yes \_\_\_\_\_ No

Type of Fence and height:

\_\_\_\_\_

If you do not have a fence, are you prepared to walk your dog multiple times?

\_\_\_\_\_ Yes \_\_\_\_\_ No

What is your family's lifestyle like?

\_\_\_\_\_ Active and on the go \_\_\_\_\_ Quiet and relaxed

\_\_\_\_\_ Entertain frequently \_\_\_\_\_ Lots of kids in and out

\_\_\_\_\_ Travel frequently

List any adults that live in your home: \_\_\_\_\_

\_\_\_\_\_

**If you have children, or if any visit regularly, please list name(s) and age(s):**

<b>First Name</b>	<b>Age</b>

Why did you decide to get a dog?

What are you looking for in a pet?

Who will be responsible for taking care of the dog?

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How many hours per day will the dog be alone?

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Where will the dog stay when no one is at home?

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When you are home?

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At night? \_\_\_\_\_

How and how often will you exercise your dog?

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Who will care for your dog when you are out of town (vacation, etc.)?

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Under what condition(s) would you have to give up your dog?

**Current and Previous Pet Information**

Please provide the following information about your current pets:

Name	Breed	Age	Spayed/Neutered	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No

If applicable, please provide the following information about any pets you have had in the last 5 years that are no longer with you:

Pet Name and Type	Reason Pet Is No Longer With You

**Current or Last Vet used:**

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

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

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

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**How did you hear about No Dog Forgotten?** (NextDoor, Petfinder, Vet – please specify)

\_\_\_\_\_

**Reference 1:** Name, email address, phone and relationship to them:

\_\_\_\_\_

**Reference 2:** Name, email address, phone and relationship to them:

\_\_\_\_\_

**Agreements for Adoption:**

I am prepared to make a 10 to 15 year commitment to my dog.

I will keep my dog on a regular routine of heartworm preventative.

I will provide flea/tick control as needed.

I will work with my vet and agree on a regular schedule for wellness visits, inoculations, and any other tests we agree are necessary for the health and well-being of my dog,

I will not chain or tie up my dog and leave it outside alone. My dog will be an indoor dog and an important member of my family.

If, for any reason, I am unable or unwilling to keep this dog, I agree to return him/her to No Dog Forgotten. I will not give this dog away, take it to a shelter, place him/her with another person or family member, or sell this dog to any other person without the express permission of No Dog Forgotten.

I am financially able to provide routine and emergency care for this dog for his/her lifetime. This includes but is not limited to food, boarding (if necessary), regular vet care, heartworm preventative and flea and tick preventative.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

Thank you for your interest in our pets!

**Please return this completed application to: [nodogforgotten@gmail.com](mailto:nodogforgotten@gmail.com)**