♂ 831pawdyguard ** Rescue **☞**

Email: 831pawdyguardrescue@gmail.com Facebook: 831pawdyguard Phone: (831)-444-5822

ADOPTION APPLICATION

All animals available for adoption are spayed/neutered, vaccinated including up to date rabies vaccine, and have been treated for worms and fleas. Once released, the new owner(s) assume all responsibility not limited to yearly exams, booster shots, rabies vaccinations, dental and medical emergencies. It is the owner(s) responsibility to register the animal with the proper jurisdiction and keep record of any and all procedures from this point forward.

*********** Date: **Contact Information** Name of Appplicant: City: State: ____ Zip Code: _____ Home #: _____ Cell #: ____ Text [] Call [] **General Information** 1. Have you applied for or adopted another aninal through 831pawdyguard Rescue? Y [] N [] 1A. If you checked yes please list the animal you adopted or why you weren't approved: 2. Have you ever surrended or rehomed an animal? Y [] N [] 2A. If you checked yes please explain: 3. Do you have other pets living full time or frequently visit your home? Y [] N [] 3A. If you checked yes please list them below:

 Name:
 Breed:
 Cat [] Dog [] Other []

 Name:
 Breed:
 Cat [] Dog [] Other []

4. Is this your first time own	ing an animal? Y [] N []
5. Do you plan to continue to	raining and/or medical care if needed? Y [] N []
6. Who is taking primary res	sponsibility for the animal's well being?
	r the guardian of said minor must agree and sign to take full financia hould that minor not be able to provide the necessary care.
*Signature:	Signature of Guardian:
Family & Home Life	
1. What type of home do you	u live in? House [] Apartment/condo [] Room []
Do you: Rent [] or Own []	
live in the home. Please attac	partment/house we require proof of permission to allow an animal to ch a written statement or form signed by both landlord and tenant or neluding contact information.
2. Number of adults in the ho	ome: Number of children in the home:
3. How would you describe	your schedule: Not busy [] Busy [] Very busy []
4. How would you describe to	the home environment: Calm [] Active [] Other:
5. Where do you plan on lear	ving the animal when you are out of home?
Crate [] Loose [] Gara	ge [] Yard [] Other:
6. Where do you plan on kee	eping the animal at night?
Crate [] Loose [] Garag	ge [] Yard [] Other:
7. If you plan on going away	on holiday do you plan to:
At home care [] Boarding	[] Take with you [] Other:
References	
Name:	Phone Number:
Relationship:	Years Known:
Name:	Phone Number:
Relationship:	Years Known:

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By signing this application you certify that the above information provided is correct and true to the best of your knowledge and understand that we at 831pawdyguard rescue have the right to contact your references, work and personal, and either approve or deny you based on the answers stated. This application is not an adoption agreement and should your application be approved, you will be notified and given another form to read and sign upon release date.

Signature:
Signature of Spouse:
Date:

FOR OFFICE USE ONLY
Name of employee:
Date Reviewed:
Signature:
This application has been reviewed and the following decision has been made:
APPROVED[] DISAPPROVED[]
If disapproved please provide reason(s) why and if this applicant can apply for a different animal