

DOG ADOPTION APPLICATION



In order to adopt, you may be asked:

-if you are at least 21 years old and to present valid photo ID with proof of current address.

-to provide proof of permission to house an animal (e.g. rental agreement, written landlord approval, proof of home ownership).

-if you are able and willing to spend the time and money necessary to provide proper care, training, medical treatment, and a lifelong home for the animal(s).

While we always make every effort to work with you to address concerns or find the most appropriate companion animal, we do reserve the right to refuse an adoption.

Name of Animal(s) Interested in Adopting:		Breed:	
Description / Coloring:			
ADOPTER INFORMATION			
Adopter Name(s):			DOB:
Phone (Home):		Phone (Cell):	
Address:		City:	
State:	Zip Code:	Email:	
How many people are in your household?			
# of Adults (over age 21, including self):			
# of Children (under age 21):		Ages of children:	
Does anyone in the household have allergies to dogs? _____ Yes _____ No			
If YES, who?			
Do you live in a (select one): ____ House ____ Apartment ____ Condo ____ Duplex ____ Mobile Home ____ Townhome			
How long have you lived at current residence?			
_____ Rent _____ Own		If renting/leasing, are there pet restrictions? _____ Yes _____ No	
If renting/leasing, a copy of your rent/lease agreement must be provided. If unable to provide, we will contact your landlord to ask if having a dog in your home is acceptable.			
Landlord's Name:		Landlord's Phone:	
Who will be the primary caretaker of your new dog(s)?			
Describe your yard: ____ No yard ____ Unfenced yard ____ Partially fenced yard ____ Completely fenced yard			
If fenced, height of fence:		Made of: ____ Wood ____ Chain link ____ Brick ____ Other If "Other," please describe:	

Activity Level in my Household is:	Low	Medium	High		
Activity level in my neighborhood is:	Quiet and rural	Somewhat active and suburban	Busy and urban		
On average, my house will be without people _____ hours per day.					
What is your plan for when your dog is home alone?					
What are the qualities you are looking for in your ideal dog?					
Tell us about your previous dog experience.					
Do you want to tell us anything else? Do you have questions or concerns?					
PET OWNERSHIP					
Former Pet(s) Names	Type of Animal	Age	Spayed/ Neutered?	Vet that treated/ reason for passing	How long ago did they pass?
Current Pet(s) Names	Type of Animal	Age	Spayed/ Neutered?	Veterinarian	
What do you feed your pet(s)?					
Current Vet:			Vet's Phone:		
Vet's Address:					

OWNER'S WORK INFO			
BOTH ADOPTERS (REQUIRED)	Adopter 1:		Adopter 2:
Occupation:			
Employer:			
Work address:			
Work phone:			
How long with employer?			
How many hours a day do you work?			
Does your job require you to travel? (yes or no)			
Do you work from home?			
What provisions have you made/are you prepared to make for your pet(s) during vacations or other absences?			
REFERENCES			
Please provide three (3) references. At least two of the references MUST be <u>professional</u>.			
Name	Phone	Email	Relationship
1.			
2.			
3.			
SIGNATURE AND AUTHORIZATION			
<p>By signing below, I authorize Hopeful Tails Animal Rescue to contact the references and veterinarian listed above as well as to allow a home visit by a representative of Hopeful Tails Animal Rescue. I certify that I am at least 21 years of age, I meet the adoption requirements of Hopeful Tails, and the information I have given is true. I recognize that any misrepresentation of facts may result in my losing the privilege of adopting a companion animal and I understand that Hopeful Tails has the right to deny my application for any reason. I give Hopeful Tails permission to view my previous and/or current animal's medical records. I understand that adoption and hold fees are not refundable and that hold fees can be applied to the adoption fee when an application is approved</p>			
[x] Signature of Adopter 1		Date	
[x] Signature of Adopter 2		Date	
For rescue use only Signature of HT Coordinator/Staff		Date	