

Pet Adoption Application

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Applicant Information

Full Name: _____

Email: _____

Phone: _____

Address: _____

City: _____ State: _____ ZIP: _____

Household & Lifestyle

Residence Type (House/Apartment/Other): _____

Own or Rent: _____ If rent, landlord name/phone: _____

Household Members (Adults/Children/Ages): _____

Allergic to pets? Yes / No

Typical hours away from home per day: _____

Current & Past Pets

Current pets (species/breed/age): _____

Are they spayed/neutered? Yes / No

Vet/Clinic name: _____ Phone: _____

Past pets (last 5 years): _____

Pet Preference

Pet interested in (Name/ID): _____

Species/Breed: _____ Age: _____ Sex: _____

Energy level preference (Low/Med/High): _____

Any special needs experience? _____

Care Plan

Daily exercise/play plan: _____

Feeding plan/brand: _____

Where will the pet stay when alone? _____

Primary caregiver: _____ Backup caregiver: _____

Agreement

I certify the information provided is true and I agree to provide proper care.

Signature: _____ Date: _____

For Shelter Use Only

For Shelter Use Only (cont.)

Application # _____ Reviewed by _____ Date _____

Approved / Denied Notes: _____