



## ADOPTER APPLICATION

Pet I'm interested in: \_\_\_\_\_

OFFICE USE ONLY	
Time Application Received:	_____
Checked in PetPoint (initial):	_____
Approved	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, reason: _____
_____	
_____	
Counselor Initials:	_____

### ABOUT YOU - **PLEASE PRINT CLEARLY**

Full Name \_\_\_\_\_

Spouse/Partner/Roommate Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

\* Which phone number is the best to reach you? \_\_\_\_\_

E-mail \_\_\_\_\_

Employer \_\_\_\_\_

Age:

0-20

51-74

21-35

75+

36-50

### ABOUT YOUR PETS

Pet Names: \_\_\_\_\_

Species/Breeds: \_\_\_\_\_

Age(s)/how long have you had the pet(s): \_\_\_\_\_

Are your dogs and/or cats spayed/neutered?  Yes  No  I do not have pets currently  Other: \_\_\_\_\_

Do your pets get along with other dogs and/or cat? \_\_\_\_\_

Current Veterinarian or Veterinarian you plan to use: \_\_\_\_\_

I/we give my vet/veterinary clinic permission to speak with Pawmetto Lifeline about my/our pet's medical history.

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

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How much do you know about heartworm disease?  A lot  Some  Not much

Are your dogs and/or cats on heartworm preventative?  Yes  No  I do not have any dogs and/or cats currently

If you selected Yes, what type of heartworm preventative? \_\_\_\_\_

If you are interested in adopting a cat or kitten, do you plan to declaw?  Yes  No  Unsure

Have you ever rehomed a pet before?  Yes  No

If Yes, please explain (how long ago, to whom/where did you rehome, circumstances, etc.):

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### **ABOUT YOUR HOUSEHOLD** Tell us a bit about your home!

Number of people in your home: \_\_\_\_\_

Ages: \_\_\_\_\_

Type of home:  Single family home  Townhouse  Duplex  Apartment

Do you own your home, rent, or live with parents?  Own  Rent  Live with parents

If you rent, do you know your pet policy?  Yes  No  N/A

Does any member of your household have an allergy to pets?  Yes  No  Unsure

Do all of the people in your home agree to having and caring for a pet?  Yes  No  Unsure

### **YOUR ADOPTED PET**

Why do you wish to adopt a pet? \_\_\_\_\_

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Describe your ideal pet: \_\_\_\_\_

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Where will your adopted pet live? (Indoors, outdoors, etc.) Please explain in as much detail as possible.

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Are there any circumstances in which you might consider giving up your adopted pet? If so, please explain.

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How much time are you willing to allot to allow your new pet to adjust to your home? \_\_\_\_\_

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Should something unexpected happen to you during the pet's life, do you have a care plan in place? \_\_\_\_\_

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I/we agree should I ever need to move that I will do my best to choose a location that will accept my pets as I am making a commitment for life to this animal.  Yes  No

I/we agree to allow you to visit my/our home by appointment as part of our application or follow up process.  
 Yes  No

All of the information I/we provided in this application is true and correct. If any of the information changes, I/we will advise Pawmetto Lifeline promptly.  Yes  No

I represent that I am the applicant and my signature below authorizes this statement.

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