

The Friends of the Shelter Adoption Application

Date: _____ Type of animal you are wanting to adopt: Dog or Cat

Name of the animal you want to adopt: _____

Name: _____ Email address: _____

Address: _____

Please include city, state and zip

Home Phone: _____ Work or Second Phone: _____

Home: Own or Rent If own, how long at this address _____

If Rent, does your landlord allow pets? _____

Landlord Name: _____ Landlord phone: _____

We will have to call your landlord and verify it is ok for you to adopt a pet.

Are there children in your home? _____ If so, what are their ages: _____

Are all family members in agreement in wanting to add a pet to the family? _____

Are there any other animals in your home? Yes or No

Please list below: You may use the back if additional space is needed

Name	Type of Animal	Age	Sex	Spayed\Neutered Yes or No If no why?	Current on shots Yes or No	How long have you had them

Please provide a veterinary reference:

(Name and phone number): _____

If you have previously adopted through a shelter or rescue, Please give the name and phone number of the organization: _____

Are you willing to give your new pet time to adjust to your home? Yes or No

(If this adoption does not work out within the first 10 days, the pet can be returned to us and your money will be refunded. After the first 10 days, we will still take the animal back but there will no refund.)

Do you agree NOT to declaw the cat? Yes or No

Do you agree to keep the cat indoors? Yes or No

(unless otherwise agreed to by us)

Do you have a fenced yard? Yes or No

If no, please explain how you will keep your new dog safe outdoors: _____

Do you agree NOT to crop the ears or dock the tail of your new dog? Yes or No

What would happen to your adopted animal if you moved or had a change in lifestyle? (New baby, marriage, divorce)

What would you do if the pet you adopted exhibited behavioral problems such as scratching or chewing on furniture, not using the litter box, or using the bathroom in the house? _____

What would you do if the adopted animal seemed sick? _____

Do you agree to return the adopted pet to The Friends of the Shelter if for any reason the pet could not stay with you? Yes or No

Do you understand that The Friends of the Shelter reserves the right to take custody of the adopted animal if the conditions of this application are not met or kept? Yes or No

Applicants Signature: _____

Someone will look over your application and call you to let you know if you are approved. This may take several days. If you submit this application on the weekend it may take longer to verify the information on your application.

Approved: _____

Denied: _____ Reason: _____

Thank you for deciding to adopt a family member from us. There is no better feeling than watching one of our pets go to their forever home.

We will give you a biography about your new pet when the adoption process is complete. We have no knowledge about the animals past other than what is listed on the biography.

Medical Care:

Please know that most of animals come to us as strays. We make every effort to provide you with a healthy pet. We are unaware of any pre-existing medical issues, other than what we list on the biography. We have listed all services we have provided on the biography as well. By signing below you understand that you are responsible for all medical care from this day forward.

Return Policy:

We understand that sometimes the new adopted animal isn't the right fit for your home. If within the first 10 days of adopting your new pet, you feel that the pet isn't right for you and your home, you or your family members are allergic, and/or your other pets do not get along with your new pet, please call us and we will gladly take our animal back and fully refund you the adoption fee. If however it is after the first 10 days, we will still gladly take our animal back but will be unable to refund your adoption fee.

By signing below you have read the above Medical care and Return policy, and understand them. You also assume all liability for your new pet. The Simpson County Animal Shelter and Friends of the Shelter are NOT liable for your new pet from this date forward. This is a legally binding contract between you and Friends of the Shelter.

Adopter Signature: _____ Date: _____

Friends of the Shelter Representative: _____