



Approved _____ Denied _____

We reserve the right to refuse adoptions to anyone. You have 48 hours to return animal for a full refund. If for some reason you cannot keep your pet, we expect the animal be returned to our rescue, and not given to another or sold to another. Are you applying for a cat or dog? Or name of animal applying for ? _____.

Name _____ Home phone _____

Address _____ Cell phone _____

Current Employer _____ Work phone _____

If not employed, who will be responsible for this pet? _____

Do you own or rent your home? _____ Live with parents? _____ Live with Roomates? _____

What type of home? City house _____, Country house _____, Apartment _____, Trailer _____

Landlord's Name _____ Phone number _____

Time at current address? _____. Will you be moving in next 5 years? _____.

If you do end up moving, what are the plans for this pet? _____.

How many People live in your home? Adults _____, Children _____, Ages of children _____.

Will this pet have contact with other children? _____. If yes, list ages _____

List any family members with allergies or asthma _____.

Where will this pet spend the **Day & Night?** D for day, and N for night.

Loose inside _____, Crate _____, Basement _____, Garage _____, Loose outside _____, Fenced yard _____

Tied outside _____, other _____.

How many hours per day will this pet be left along on average? _____.

Who will care for this pet when you're out of town? _____.

Have you ever given a pet away?(including to an animal shelter or family member) yes. No.

If yes, please explain. _____.

Have you ever had a pet that was : Hit by car___, Ran away___, Stolen___.

Are you aware the yearly cost of pet care, not including emergencies, can exceed \$1,000.00?
Yes___, No___.

Our adoption fee for this animal is \$_____.

Are all your current pets spayed or neutered?_____. **Are all pets current on vaccinations?_____.**
Are your current pets social with other animals?_____.

Adjustment to a new home may take a month or more. Are you willing to allow this time?_____.

All of our animals have been examined by our Vet, and received vaccinations, and spay and neuter if old enough for this procedure. If too young, you will be given appointment for future surgery which is paid for by us, and included in your adoption fee. Since most of our animals were strays, we may not have knowledge of past medical issues. Please note that your new pet **MUST** be spayed or neutered.
Are you willing to make a 15 to 20 year commitment to this pet? Yes___No___.

Please list any pets you now have, or have had in the past:

Dogs_____

Cats_____

Were all of the above animals spayed or neutered? Yes___, No___.

Current or past veterinarian’s Name and phone number_____

If no pets, please list two personal references._____

Will you agree to a home visit with our animal? Yes___, No___.

Email address: friends4poundpaws@gmail.com

By signing, I affirm that I am 18 years of age or over, and the information contained on this form is true to the best of my knowledge. I grant permission to Friends 4 Pound Paws Rescue to contact my landlord and veterinarian to discuss the information listed. I understand that any adoption maybe approved or denied for any reason. Should I be approved for adoption, I understand that I will be required to make a substantial commitment of time and money to this animal for up to 20 years. I further understand that most of the animals in the care of Friends 4 Pound Paws Rescue may have an unknown medical history or behavioral issue. You are responsible for all future medical care of this animal, once we complete the basic vaccinations and spay or neuter. Please note that all dogs are required to be licensed in your township or city. Cats do not require a license.

Signature_____Date_____

F4PP Volunteer_____Date_____