



Name of Dog/Cat: _____

Age: _____

Date: _____

ADOPTION APPLICATION FORM

For Internal Use Only

Cat

Dog

We are a 100% volunteer organization. We appreciate your time and concern. We will do our best to find the right pet for you but first we need your help. Please take a few moments to read and complete this application. **We respect your privacy and will not share nor sell any information you provide!**

Before you begin your interview with an adoption counselor, please note that you:

- Must be prepared to pay a minimum donation \$200 (non-refundable). That donation includes all shots, spay/neuter, microchipping and for cats, FIV/FelV testing
- Must be at least 21 years of age
- Must provide the name of two personal references that we can reach by phone
- Understand that we cannot guarantee an animal's behavior or is housebroken;
- Should understand that while our animals have been medically evaluated, we cannot guarantee the health of our animals; and
- Understand that we reserve the right to deny any application.

PERSONAL DATA

Name: _____

Age: _____

Address: _____

Apt #: _____

City: _____ State: _____ Zip: _____

☏ Phone (c): _____

☏ Phone (h): _____

✉ E-mail: _____

Occupation: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

☏ Phone (w): _____

Would you be interested in volunteering with us? Yes No

PERSONAL REFERENCES

(Not living with you and reachable by phone during this interview)

	REFERENCE NAME	ADDRESS	CITY	STATE	ZIP	PHONE
1						
2						

MEDICAL REFERENCE

(If you currently have a pet or recently lost one within the past year)

VETERINARIAN'S NAME	PET'S NAME	VET PHONE NUMBER	CITY	STATE

HOUSEHOLD INFORMATION

Who will be responsible for your pet?: _____

Do you live alone? Yes No If not, who are the other members (please fill in below):

1	2	3	4
Working hrs:	Working hrs:	Working hrs:	Working hrs:

Maximum number of hours pet will be left alone?: _____

How many children are at home?: _____ List ages here: _____

Are any members of your family allergic to animals?: _____

If you have other people living with you, have they agreed to bring an animal into their home?: Yes No

Do you: Own Rent

Does your landlord/lease allow pets?: Yes No

Elevator in building?: Yes No

Do you have screens on your windows?: Yes No

Fenced in yard?: Yes No

Where will your pet primarily be kept?: Inside Outside

Are you moving?: Yes No If so, when?: _____

PET INFORMATION

For whom is the pet for?: Self Gift

Will you have your pet neutered/spayed?: Yes No

Will you have your pet declawed?: Yes No

If you are interested in adopting a dog, what are your plans for training him/her?

PET INFORMATION

(Continued)

If you are adopting a dog, how many walks a day will he/she get?: _____

Are there any other pets currently living in your household?: Yes No

If yes, how many?: _____

How long have you had your pet(s)?: _____

Where did you get your pet(s)?: _____

What do you currently feed your pet(s)?: _____

Has your pet(s) been vaccinated?: Yes No

If yes, when?: _____

If you have a cat, is he/she declawed?: Yes No

If you have a dog, have you given him/her training?: Yes No

If so, what kind? _____

Have you ever had a pet not currently in your care?: Yes No

If yes, what breed(s)? _____

How long did you have your pet(s)?: _____

Where did you get your pet(s)?: _____

Where is that pet now?: _____

Has one or more of your pets died within the last 12 months?: Yes No

Please check cause: Age Accident Illness

Have you ever surrendered an animal to a shelter: Yes No

If yes, please explain the circumstances: _____

ADOPTION FEES

Fee includes spay/neuter, full vetting and vaccinations, FIV/FELV testing (for cats), microchipping and delivery to your home.

ADULT

SENIOR

\$200 (\$275 for a pair)

\$125

Please email this application to: ReadyForRescue@gmail.com