

NEVADA HUMANE SOCIETY

Animal Adoption Application

Pet ownership is a serious responsibility. The policy of the Nevada Humane Society is to insure that each person who adopts a pet not only be aware of that responsibility, but that each person be **willing** and **able** to accept that responsibility morally, physically and financially. It is quite true that not every person who *desires* a pet should *own* a pet.

This application is designed to help us make the best placement possible – the right home for each animal and the right animal for your home. The adoption process takes time because we are committed to giving you all the information and support you need to have a successful adoption. We ask for your patience and cooperation in the joyful process of bringing people and animals together.

TO BE CONSIDERED FOR AN ADOPTION TODAY, YOU MUST:

- ✓ Be at least 18 years of age
- ✓ Be a local resident
- ✓ Have a current identification showing present address
- ✓ If adopting a dog, have an adequately fenced-in yard
- ✓ Understand that the Nevada Humane Society reserves the right to deny any adoption application

Date _____ Name _____ Spouse _____
Address _____ City _____ State _____ Zip _____
Phone# _____ Cell# _____

Employer _____ Work Phone# _____
Spouse's Employer _____ Work Phone# _____
Number of adults in household: _____ Children _____ Ages _____
Who will be responsible for the pet? _____

Do you live in a: House Apartment Mobile Home
 Condo With Parent/Relative Other

Do you own or rent? OWN RENT

Landlord's Name _____ Phone# _____

How long have you lived at your present address? _____

Are you planning on moving within the next 6 months? _____

If you do move in the future, what will you do with your pet? _____

What pets do you currently have in your household?

	KIND	Spayed/Neutered	KEPT WHERE	How long owned?	AGE
#1	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
#2	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
#3	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
#4	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
Other	_____				

List your previous pets:

	KIND	Spayed/Neutered	KEPT WHERE	How long owned?	AGE
#1	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
#2	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
#3	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
#4	<input type="checkbox"/> dog <input type="checkbox"/> cat	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> in <input type="checkbox"/> out	_____	_____
Other	_____				

Veterinarian _____ Phone# _____

*Have you applied to adopt an animal from us before? Yes No

*Have you adopted an animal from us before? ____ When? _____

*What happened to that animal? _____

*Have you ever surrendered an animal to a shelter?
What were the circumstances? _____

*Does any member of your household have allergies to animals? Yes No
If yes, to what kind of animals? _____

*How much do you anticipate spending yearly to feed, vaccinate, license & provide medical care for your animal? _____

*Who will care for your pet should you go away on vacation? _____

*How many hours per day will the animal be left alone? _____

*Where will the animal be kept during the day? _____ At night? _____

*How much time would you allow your new animal to adjust to your present pets and new home? _____

*If your animal gets lost, what will you do to try to find him/her? _____

*If you must give up this animal, how will you place it? _____

If interested in adopting a DOG/PUPPY, please fill out this section

*Do you want the dog for a: (check all that apply)

- House Pet Breeder Fighting Dog Watch Dog
 Gift Friend for other dog Outdoor dog Companion
 Other

*Where will you exercise your dog? _____

*Will you use a leash to walk/exercise you dog? _____

*If adopting a puppy or non-housebroken adult, how do you plan to housebreak it?

*Do you plan to take your dog to obedience classes? _____

*What will you do if you pet shows destructive behavior? _____

*Do you plan to place personal identification on your dog? _____

*If you own a pick-up truck, do you plan to let your dog ride in the truck bed? _____

*Have you had a dog die on your premises of Distemper, Parvo or unknown causes within the last three months? _____

*Since most shelter animals have unknown medical backgrounds, are you prepared to take your new pet for a complete veterinary exam within 2 weeks and to provide necessary medical treatment? _____

*Do you understand your local ordinance for licensing? _____

*Dogs often live up to 15 years; are you ready to take responsibility for his/her life?

If interested in adopting a CAT/KITTEN, please fill out this section

*Do you want the cat for a: (check all that apply)

- House Pet Mouser Breeder Other
 Gift Friend for other pet Companion

*Would the cat be allowed outside? _____

*Do you plan to declaw your cat? _____ If so, why? _____

*Do you intend to put personal identification on your cat? _____

*How will you train you cat to: Stay off furniture/tables? _____
Not scratch furniture? _____ Not chew plants? _____

*What will you do if your cat shows sudden/abnormal destructive behavior? _____

*Have you had a cat die on your premises of Distemper, Panleukopenia Leukemia or unknown causes in the last 3 months? _____

*Cats often live longer than 15 years; are you ready to take responsibility for his/her life?

*Since most shelter animals have unknown medical backgrounds, are you prepared to take your new pet for a complete Vet exam within 2 weeks & provide necessary medical treatment? _____

The Nevada Humane Society reserves the right to check back on the welfare of your animal. Would you object to an inspection of your premises by Humane Society personnel?

YES NO

I hereby release to the Nevada Humane Society all veterinary records of any and all animals I have had or currently have.

I certify that all the information in this application is true and understand that false information may void the application. I also understand that failure to comply with conditions set forth in the adoption contract could result in the refusal of future adoptions from the Nevada Humane Society.

Signature _____ *Date* _____

FOR STAFF USE ONLY

Counselor _____ Date _____

- Approved for _____
- Disapproved because _____
- Landlord permission obtained _____
- Fence check approved _____
- D.A.F. checked _____ I.D. checked _____

Contract # _____ Release # _____ Age _____ Sex _____ Color _____

Spay/Neuter Date _____ Tag # _____ Name _____

Vaccination info: _____ Meds: _____ URI discussed _____

Comments: _____

