

Nevada Humane Society

Dog Adoption Application

This form is to help us help you find the best match for you and the animals awaiting adoption.
To adopt a pet you:

- Need to show current identification showing present address.
- Must be at least 18 years of age.
- Have permission from your landlord or own your own home.

Your name: _____

Address: _____

City, State, Zip Code: _____

Phone #s with area codes: Home: _____

Work: _____ Cell: _____

E-mail address: _____

Why would you like to adopt a dog? _____

Home life

How many pets do you have presently? _____ Dogs _____ Cats _____ Others, please list

here: _____

Do you live in an: _____ Apartment _____ House _____ Mobile Home _____ Other: _____

How long have you been at your current address? _____

Do you rent or own your home? _____

If you rent, what is your landlord's name and phone number? _____

If you move, what would you do with your pets? _____

Name(s) of other adult(s) in the household _____

Do you have any children living in your home? _____ Yes _____ No.

If yes, please list their names and ages: _____

Current pets

Name	type of animal	Age	Indoor/Outdoor?	Time in your care	Spayed/Neutered
_____	_____	_____	_____	_____	Yes____ No____
_____	_____	_____	_____	_____	Yes____ No____
_____	_____	_____	_____	_____	Yes____ No____
_____	_____	_____	_____	_____	Yes____ No____

If you have more pets, please continue on the back.

Do your pets have their vaccinations? ____ Yes ____ No

How often do they go the veterinarian? _____

Past Pets

Please tell us about any pets you have had within the last 5 years who are no longer living with you. (Feel free to continue on the back of the page.)

Name	Age	Reason no longer with you	Spayed/Neutered
_____	_____	_____	Yes____ No____
_____	_____	_____	Yes____ No____
_____	_____	_____	Yes____ No____

If you have ever lost a pet at an early age or due to an accident or illness, please let us know what happened: _____

Have you ever given up a pet? _____ If yes, where did the animal end up?

____ Found new home ____ With family member, former partner, or roommate ____ Took to shelter
 ____ Called Animal Control to pick up Other _____

Veterinary care

Name & phone number of your veterinarian: _____

Name & phone number of other veterinarian you have used within the past 5 years (if any):

Are you financially able and willing to provide annual checkups, vaccinations? ____ Yes ____ No

Would you be able to provide emergency veterinary care for the dog if needed? ____ Yes ____ No

Dog's Activities

Where will the dog spend time? Check all that apply: ____ in the house ____ in a crate
 ____ in a fenced yard ____ on a tether or chain ____ walked on a leash ____ with me at work

in a kennel running free garage or basement other locations - please describe: _____

Describe the area and street where you live: _____

Where will the dog ride in your vehicle? _____

Will your dog have a collar with an ID tag? yes no maybe

Do you know about dog licensing requirements in your area? yes no will find out

If your dog gets lost, what would you do? _____

How long are you willing to allow the new dog to adjust to his/her new home? _____

What will you do if your new dog does not get along with your present companion animals? _____

Do you plan to take your dog to obedience classes? yes no maybe

Long-term Care

Will you be able to arrange care for your dog when you travel? _____

A dog can be expected to live 10 to 15 years. Are you willing to make a lifetime commitment to this dog? _____

Adoption Promotion

How did you hear about pet adoptions at Nevada Humane Society? (please check all that apply)
 Newspaper article Newspaper ad Magazine Radio TV Poster Friend
 Off-site adoption Phone books Website other _____

Can you provide any additional detail? _____

Did a special promotion make a difference in your decision to adopt a pet now? yes no

Agreement

By signing this form, I acknowledge that all information on this form is true and correct. I understand that any misrepresentation of fact may result in NHS refusing adoption privileges to me. I authorize NHS to contact all veterinarians listed on the application and the landlord if applicable. If my request for adoption is approved and later NHS discovers the above information is not true or correct, NHS reserves the right to remove the adopted dog from my home.

Signature: _____ Date _____