



Dog Adoption Application Form

Please email completed form to info@mabprachananimalshelter.org

Name of the dog you are interested in (if applicable): _____

Personal Information

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First Name: _____ Last Name: _____

Date of birth: _____ Nationality: _____

Address: _____

City: _____ Post Code: _____ Country: _____

Phone: _____ Mobile: _____

Email: _____

Gender: _____

Employment Status:

Full Time: ☐ Part Time: ☐ Unemployed: ☐ Student: ☐ Retired: ☐

Family & Housing Information

How many adults live in your home? _____ Please list their relationship to you? _____

How many children live in your home? _____ Please list their ages: _____

Are all members in your household aware and in agreement with the adoption? Yes ☐ No ☐

If you ticked no, please explain: _____

Please describe your household: Active/Noisy ☐ Quiet ☐ Average ☐

What best describes your home & area you live in (tick more than one):

House ☐ Duplex ☐ Apartment ☐ Compound ☐ Inner City ☐ Urban ☐ Rural ☐

Do you rent or own your home? _____

If you rent, does your landlord allow pets?: Yes ☐ No ☐

Landlord Details

Name: _____ Address: _____

Phone: _____ Email: _____

(By providing your landlord contact details you consent to us contacting them, please inform them of such)

Do you have a fenced yard and a gate that is closed, ensuring the dogs safety? Yes ☐ No ☐

If yes, what type of fence & how high is it? _____

Other Pets

Have you owned a dog before? If yes, for how long? _____

Do you have other pets?: Yes ☐ No ☐ If yes, what type & age? _____

Adoption Information

What is your idea of an ideal dog (age, size, breed)? And why? _____

Mabprachan Animal Shelter

Telephone: +66 089 505 7021

Chanthaburi
THAILAND



E-mail: info@mabprachananimalshelter.org
Facebook: Mabprachan Animal Shelter,
Thailand
Website: www.mabprachananimalshelter.org



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Why do you wish to adopt a dog? _____

What dog behaviours would present a problem for you and how would you deal with those problems? _____

How would you exercise your dog & how often? _____

How many hours per day would the dog be left alone? _____

Where will the dog spend the day? _____

Where will the dog spend the night? _____

Where will the dog be when you go on holidays? _____

If you move or leave the country in the future, what will you do with your adopted dog? _____

By adopting a dog from Mabprachan Animal Shelter I agree to the following:

1. To let a representative of Mabprachan Animal Shelter visit my home by appointment, before and after the adoption.
2. To provide the dog with collar and ID tag on arrival.
3. To provide regular annual health care including vaccinations by a licenced veterinarian.
4. To contact Mabprachan Animal Shelter immediately if, for whatever reason, I can no longer take care of the dog and to not give the dog to any other home, person or place, without the permission of Mabprachan Animal Shelter.
5. To ensure the dog will reside in my home as a pet and to provide quality food, fresh water, indoor shelter and affection.

I fully understand all of the above and all of the information provided is true and correct. If any statements made by me are found to be false and/or if a follow up inspection reveals any form of mistreatment or neglect of the adopted dog, Mabprachan Animal Shelter reserves the right to reclaim the animal.

Print Name: _____

Signed: _____

Date: _____

Mabprachan Animal Shelter

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