



Dog Adoption Application



Dogs Name: _____

Today's Date: _____ Home phone _____
Name: _____ Cell phone _____
Address: _____ Work Phone _____
City: _____ State: _____ Zip _____ Email: _____
Employer: _____ State: _____
Are you at least 18 years old? _____ Are you a student? Yes ___ No ___

1. Have you ever adopted from the Humane Society of Catawba County before? No ___ Yes ___
If yes, do you still have this pet? _____
If no, what happened to this pet? _____

2. I want this pet for: Myself ___ Gift ___ Family Pet ___ Companion for pet ___ Working/Farm ___

3. Do all members of your household want a new pet? Yes ___ No ___
If no, please explain _____

4. Please list all people your new dog will be living with: (Please specify age)

Name _____	Age _____	Relationship _____
Name _____	Age _____	Relationship _____
Name _____	Age _____	Relationship _____
Name _____	Age _____	Relationship _____

5. Do any members of your household have allergies to specific animals? _____

6. Type of home (circle one): House Apartment Condo Townhouse Trailer Farm Other

7. Do you own your home? Yes ___ No ___

If you are renting does your landlord allow dogs? Yes ___ No ___

Landlord's Name _____ Phone _____
Deposit Required Yes ___ No ___ How much? _____

8. Do you want this dog to live: Inside only ___ Outside only ___ Inside/Outside (explain)

9. Where will this pet be kept when you **are** home?

10. Where will this pet be kept when you are **not** home?

Indoors ___ Basement ___ Garage ___ Crate ___ Outdoors ___ Tied outside ___ Outdoor Kennel ___
Other (explain) _____

11. In a 24-hour day, how long would the pet be left alone at a given time? _____

12. Do you have a fenced yard? Yes ___ No ___ Height _____ ft Type _____

13. If you do not have a fence how will you provide exercise?

14. Have you ever given an animal away? Yes__ No__

If yes, please explain

15. What kind of life changes would cause you to give up an animal? _____

16. Given the possibility of housetraining difficulties, please explain your expectations on this tedious and sometimes frustrating task.

17. Who would ultimately be responsible for the socialization and training needs of your new pet?

18. What happens to the pet if you discover a bad habit we have not identified?

19. Why are you interested in this particular animal?

20. How are you going to help this dog adjust to its new home?

List the companion animals that have lived with you in the past 5 years:

Name	Dog/Cat	Breed	Age	Where does Animal Stay	S/N

Who is your Veterinarian? _____

With my signature below, I signify I understand that:

- I am **18 years of age or older**
- I will provide **food, shelter, medical care, love and affection** for the lifetime of this animal, which could be as long as **20 years or more**.
- I will give my dog (s) Heartworm prevention monthly, **as prescribed by my Veterinarian**.
- I agree to take this dog to a Veterinarian for exams and vaccines at least once yearly and as needed, and to provide vet care, at my own expense, should this animal become ill or injured.
- I am not adopting this dog to be used as a guard dog, or to be chained/tied outside. The Humane Society **does not convey irrevocable ownership** of the adopted animal to me.
- I **cannot sell, transfer, trade, give away, or lease** the adopted animal to any person or organization without **first notifying HSCC**.
- I am **legally obligated to return the animal** to HSCC if such transfer above is not approved.
- HSCC has permission to inspect the premises under which the animal is kept at any time.
- Agents of HSCC **may remove the animal from my control** if conditions are deemed unsuitable. Examples:
 - If the animal is chained or permitted to run at large
 - If food, water and/or shelter provided for the animal is inadequate
 - If I have falsified any information on this application
- I agree that I will have no recourse of any kind resulting from such action by HSCC
- HSCC makes **no representations or warranties regarding the health, size or temperament** of the animal being adopted hereunder, and HSCC expressly disclaims the same.
- I agree to hold harmless HSCC, its officers, directors, agents and representatives for **any and all claims, losses and damages**, whether to the person or property, which might arise as a result of the subject animal's health condition or behavior.
- This application remains the property of HSCC.
- I am stating that the above information is **true**.
- By signing below, I authorize agents of HSCC to contact my previous veterinarians to receive medical records for my pets.

Applicant Signature _____ **Date** _____

FOR OFFICE USE ONLY

APPLICATION SUBMITTED TO STAFF ON _____
RECEIVED BY _____

Approved _____

Denied _____