



PAWS ADOPTION APPLICATION

1103 E. Kingshighway Paragould, AR 72450 Phone & Fax (870) 240-0997 Email: paws@grnco.net Adoption Fees: Dogs \$75 Cats \$55

Pet ID#: _____

The following questions help us enable us to make appropriate placements for the animals entrusted to our care.

Name _____ Address _____ City _____ State _____ Postal Code _____

Home Phone _____ Cell Phone _____ Place of Employment _____ Work Phone _____

Household & Basic Owner Information:

1. You: own _____ or rent _____ your home? If you rent, are pets allowed? Yes _____ No _____
 o Landlords name _____ Phone Number _____
2. If you are planning on adopting a dog, do you have a fenced-in yard? Yes _____ No _____
 What type of fence? _____
3. If you do not have a fenced in yard, what arrangements are planned for the dog to get proper exercise and perform bathroom duties?

4. List the ages & sex of all adult and children living in the home.

5. Are all members of the household aware that you plan on adopting a pet?
 Yes _____ No _____ Do they all approve? Yes _____ No _____
6. Who will have primary care of this pet?

7. Approximately how many hours will this pet be left alone throughout the day?

8. Why do you want a new dog or cat? (Check all that apply.) Watch dog (please explain) _____
 Companion for another pet Gift for the kids Hunter/mouser Breeder Companion other: _____
9. Where will this dog/cat be kept during the day? _____ At Night? _____ When alone? _____
10. When outside, this dog/cat will be: in a fenced yard in a pen chained or tied up walked on a leash running loose
11. When left outside, what kind of shelter will this dog have? _____
12. Are you prepared for costs in the future for this pet? (Vet visit, grooming, heartworm preventative, flea/tick control. Yes _____ No _____
13. If you cannot keep this pet, what will you do with it? _____
14. Do you plan to travel with your pet? Yes _____ No _____
15. If you do travel, where would the pet stay while you are away? Friend/Family, Kenneled, Left at home. Other _____

Pet History

Do you own other pets? Yes _____ No _____ If so, how many? _____ *If you answered no, disregard the questions that do not apply.*

Are all your pets current on their vaccinations? Yes _____ No _____

Are your pet's spayed/neutered? Yes _____ No _____

Your Vet's Name, Address and Telephone Number: _____

List all current pets:

Type of pet	Age	Sex (M/F)	Is it fixed?	Kept where	How long owned

List pets previously owned:

Type of pet	Spayed/Neutered	Kept where	How long owned	What happened to it

I certify that the above information is true and understand that any false information may result in nullification of the adoption

Signature: _____ Print Your Name: _____ Date: _____