

AVOYELLES ANIMAL WELFARE SOCIETY, INC

Adoption Application

		APPLICANT I	NFORMATIO	N		
FOR QUESTIONS R	REQUIRING	A YES OR NO AN	SWER, PLEAS	E CIRCL	E CHOICE OF	YES OR NO
Name:					Date:	
Home Phone:		Work Phone:			Cell Phone:	
Email address:						
Current address:						
City:		State:			ZIP Code:	
Own Rent (Please circle)		How long at address?			If renting, landlord Allow Pet(s): Yes No	
Type of housing: O House	O Apai	rtment O Mo	bile Home	O 0t	her: specify	
If renting, permission to contact landlord? Yes No		Landlord's name:			Landlord phone:	
Willing to allow a representative from Avoyelles Animal Welfare Society, Inc. to visit home (by appointment) to perform a home study inspection before and after adoption: Yes No						(by appointment) to
PLEASE C	IRCLE ANY	OF THE FOLLOW	ING REASON	S FOR A	DOPTING A PE	Т
Family pet	Child's pet				anion for ner pet	Other (specify):
		HOUSEHOLD I	NFORMATION	ı		
Number of adults in househo	ld?					
Does anyone smoke in the household? Yes No	Do they	Do they smoke in the house or outside?			Anyone in household have allergies to pets? Yes No	
Any children in the home? Y	es No	If yes, how mar	ıy?			
Gender/Ages of children:				Do any other children visit your home often? Yes No		
		REGARDING PI	ETS/PET CARI	E		
Circle type and number of pe	t(s) curren	tly living in your	home:	Dogs	Cats	Other
Have they been spayed/neutered? Yes No	If no, please explain:					
Do any of your pets live outo	doors? If yes, describe the pet:					
Do you use a veterinarian to treat your pet(s)? Yes No		Name, address and telephone number of veterinarian:				
Do you accept the responsible Yes No	lity for the	proper care of th	e adopted pe	t(s) to r	eceive medica	I care as needed?
Does Avoyelles Animal Welfa adopted pet(s)? Yes No	re Society,	Inc. have permis	sion to inquir	e of any	medical treat	ment received for the
How many pets have you owned in the past?		Will the pet(s) be allowed outdoors? Yes No Sometimes			If you move, will your pet(s) go with you? Yes No	
Where will the pet(s) stay who Outside In the basement Other (explain):	nen alone d Garage	during the day? (Free-roaming i		Inside	e – in one roon	n in the house
Where will the pet(s) sleep a Outside In the basement Other:	t night? (0 Garage	Circle One): Free-roaming i	n the house	Inside	e – in one roon	n of the house
What percentage of the time	will the pe	t(s) spend inside	the house?	%)	
If you adopt a cat/kitten, do you plan to declaw it? Yes No If yes (Circle One): Front two only All four					ly All four	
Have you ever given away a	pet after h	aving it for a brie	f period of tir	me? Yes	s No	



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If yes, please explain why you gave the	ne pet away?						
Would you justify giving the adopted pet(s) up for any reason? (Circle all that apply.)							
Moving New Baby Not getting along with other pets Divorce Scratching Other:	Children Lost interest Shedding Too time consuming	Allergies Not using litter box Medical problems (animal) Medical problems (yourself or others) Want to travel					
If you go away for a few days, or on a	a vacation, what will you do with the	adopted pet(s)? (Circle one.)					
Hire a pet sitter	lire a boarding facility eave the pet(s) home alone						
How will you introduce your new pet(s) to your home if you have other pe	ts? (Please explain.)					
Have you ever looked at or applied fo	r a pet with another rescue group?						
Yes No		If yes, how long ago?					
Did you adopt? Yes No	If you did not adopt a pet, why n	ot? (Please explain.)					
Do you understand that if the pet(s) y before you receive the pet(s)? Yes	you adopt is of appropriate age to be No	spayed/neutered, it will be altered					
Do you understand that if the pet(s) y have it altered per the terms of the ac	you adopt is not of appropriate age to doption contract? Yes No	be spayed/neutered, you agree to					
How did you hear about the Avoyelles Website Newspaper: Which one? Word of Mouth Radio At an adoption day Other (please explain):		hat apply.)					
Will you be willing to sign the legal pe	et(s) adoption contract? Yes No						



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AGREEMENT AND SIGNATURE					
Copy of identification:					
Drivers License	State Identification	Other			
Please list any general quest Society, Inc.	tions you would like to ask abo	out adopting a pet(s) from Avoyelles Animal Welfare			
have made a commitment to in my life and feel I am still care for this pet, I will, with I was also made aware that on the well-being of the pet are not being met. Terms w I have read and agree with adopting a pet(s). I also all and/or landlord listed in this obtain any additional inform	care for the new pet(s). I haw willing and able to care for the out fail, contact Avoyelles Ani Avoyelles Animal Welfare Sociand reserves the right to revolute vary from pet to pet, and vote above statement. Any falsow Avoyelles Animal Welfare so application to verify the accuration necessary to process my	the addition of a family pet is an important decision. I ave thought through possible changes that may occur nis pet. I agree that if, for any reason, I can no longer imal Welfare Society, Inc. Seiety, Inc. personnel make random home visits to check oke the adoption if it is found that specific conditions will be disclosed on the adoption contract. See information provided by me will disqualify me from Society, Inc. personnel to contact the veterinarian uracy of information provided in this application and y adoption application. Avoyelles Animal Welfare plication if it feels the adoption is not in the best			
Applicant Signature:		Date:			
Approved	Not Approved: Reason:				
Avoyelles Animal Welfare So	ciety, Inc, Interviewer	Date:			
Avoyelles Animal Welfare So	ciety, Inc, Interviewer	Date:			
Avoyelles Animal Welfare So	ciety, Inc, Interviewer	Date:			
Avoyelles Animal Welfare So	ciety, Inc, Interviewer	Date:			