



**Border Animal Rescue, Inc. (BAR)  
Adoption Application**

BAR # \_\_\_\_\_  
Adoption fee \_\_\_\_\_  
Method of pmt \_\_\_\_\_  
ID \_\_\_\_\_

**THIS SECTION COMPLETED BY BORDER ANIMAL RESCUE**

Adoption Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Pet to be adopted: Dog \_\_\_\_ Puppy \_\_\_\_ Cat \_\_\_\_ Kitten \_\_\_\_  
Name of pet: \_\_\_\_\_      Approx. age: (yrs.) \_\_\_\_\_ (mos.) \_\_\_\_\_      or DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Breed: \_\_\_\_\_      Color: \_\_\_\_\_      Gender: \_\_\_\_      Altered: Yes \_\_\_\_ No \_\_\_\_  
Microchip number \_\_\_\_\_  
Fostered by: \_\_\_\_\_      Processed by: \_\_\_\_\_

**ADOPTER INFORMATION**

Name of pet you wish to adopt \_\_\_\_\_  
Your First Name: \_\_\_\_\_      Last Name: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_  
Mailing Address, if different: \_\_\_\_\_  
Primary phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_      Secondary phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email: \_\_\_\_\_  
Ages of all household members: \_\_\_\_\_  
Housing: Own  or Rent       Length of time at this address: \_\_\_\_\_  
If renting, Landlord's name: \_\_\_\_\_      Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
If renting, do you have permission to have a pet in your home? \_\_\_\_\_  
Would you agree to allow Border Animal Rescue to conduct a home visit? \_\_\_\_\_  
Please list two references (not related and not living with you):  
Name: \_\_\_\_\_      Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Name: \_\_\_\_\_      Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Please list your other pets (if any), their species, whether they are spayed/neutered, and whether they are up to date on vaccinations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



