PRELIMINARY ADOPTION FORM Always Hope Animal Rescue

Application Date:_			
Name of Animal(s) you would	like to ado	pt:	
Gender of animal: Male:	Female:_	Unknown:	

Thank you for your desire to adopt a rescue animal. Please understand that filling out this application does not guarantee you will receive an animal and that placement of an animal within your home is at the complete discretion of Always Hope Animal Rescue. Thank you for considering a rescue.

Name:					
			Apt./Suite:		
City:	State:_		Zip:		
Home Phone:	Cell phone:		Work Phone:		
E-mail Address:					
Year of Birth:	MUST I	BE OVER 2	1 TO APPLY AND ADOI	PT	
for?	at you would consider to be the		1 ,		
•	are you looking for? (mark all	11 2	ad for other not Ciff	Mo	
	Family petChild's pet mals you currently own:	Friei	id for other petGift	NIC	ouser
	Animal:	Λ σε·	Snaved/Neutered	Vec	No
Name:	Animal:	Age:	Spayed/Neutered_	Yes	No
Name:	Animal:	Age:	Spayed/Neutered_	_Yes _	No
Name:	Animal:	Age:	Spayed/Neutered_	Yes _	No

Name:	Animal:	Age:	What happened to it?
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5. Current Veterinarian:	Name of Vet C	linic:	Phone #:
	Address:		City:
6. How do you feel abou	t the following?	please feel free to	give your opinion in detail)
Declawing: (cat only)			
Spaying/Neutering:			
Outdoor cats/dogs:			
Cuthanization:			
			es your landlord or lease allow pets?:
. Years at your current a	address?		9. How many people in household?_
0. How do you plan on	keeping the anim	nal contained outsi	de (dog only) fenced in yard
underground fence	tie out/cable	e training	Other (explain)
1. Please list the ages o	f any children un	der 18 living in ho	me:
2. Are you one of the he	eads of your hous	sehold?	
3. Is everyone in your h	ousehold in favo	r of adopting a per	?
4. Who will mainly be	responsible for ta	king care of the po	et?
			ts or dogs?
16. Please estimate how			
Inside:	% of the time	Outside:	% of the time
17. Where will the anima	al sleen?		

18.	What will you do with the animal while you are not at home?	
19.	How many hours per day would the animal be left alone?	
20.	How do you handle destructive behavior (i.e. scratching furniture)?	
21.	Have you ever raised a puppy before? (dog only)	
22.	How would you handle a cat that is litter box trained but suddenly starts urinating outside the litter box	?
(cat	t only)	
23.	What will you do with the animal when you go on vacation?	
24.	What would you do with your animal if you had to move?	
25.	Pets can live as long as 15-20 years. Select all of the following that may cause you to give up an anima	1:
	Birth of a childNew roommateMarriageDivorceBiting	
	SprayingNeeds regular medicineAllergiesNone	
26.	What kind of personality traits in a pet are you NOT willing to live with? Select all that apply.	
	Excessive barking/meowingAggressiveUnfriendly toward other petsShy, skittish, or	hides
	Urinates outside litter boxJumps on kitchen counters/tables	_Other
27.	Have you ever had to return a pet to a breeder or take one to a pound, shelter or rescue?	
If s	o, please explain:	
	Would you be opposed to allowing a volunteer from Always Hope Animal Rescue to check on and/or vimal at your home?YesNo	visit the
mis	ave read the foregoing and certify that the answers I have given are complete, true and no sleading in any way. By signing this I am authorizing Always Hope Animal Rescue pern contact landlords, associations and veterinarians.	
Sig	gnature: Date:	_