

# ADOPTION APPLICATION



## CONTACT/PERSONAL INFORMATION

Name			
Address		City	Zip
Phone #		Alt #	
Vehicle type			
Are there children in household?	#	Ages	

FAILURE TO FILL OUT THE ENTIRE FORM MAY RESULT IN APPLICATION DENIAL

### General information

Do you receive stable income? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you over 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is this pet a surprise gift? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes..please provide contact information.
Who is your current employer? How can they be reached?			
Do you Rent? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide landlords information	Name: Telephone #:	
Where will the pet spend the night?	<input type="checkbox"/> Inside <input type="checkbox"/> Outside <input type="checkbox"/> Crated <input type="checkbox"/> Garage	Where will the pet spend the day?	<input type="checkbox"/> Inside <input type="checkbox"/> Outside <input type="checkbox"/> Crated <input type="checkbox"/> Garage
Do you have a fenced in area? <input type="checkbox"/> yes <input type="checkbox"/> no	Will you keep your new pet on a leash? <input type="checkbox"/> yes <input type="checkbox"/> no	How long will your new pet spend alone?	<input type="checkbox"/> < 1 hour <input type="checkbox"/> 1-4 hours <input type="checkbox"/> 4-8hours <input type="checkbox"/> more than 8
Who will have primary (and financial) responsibility for this pet?	Name:	Would you consider training before return/rehoming this pet? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have close neighbors that have pets? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Do you have current pets?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
_____ dogs _____ cats _____ rodents _____ rabbits _____ reptiles _____ livestock			

Do you agree to contact MCHS if you can no longer keep this pet? yes no

### PET HISTORY

omit if no current/past pets

Who have you chosen to be your regular veterinarian?	Clinic name: Phone number:		
<u>Does anyone in your home have pet allergies?</u> (include relatives)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Are your current pets microchipped?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you returned an animal to a shelter?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Current pets Altered (fixed)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Would you like help socializing pets?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Personal reference:			

AGREEMENT ON BACK, PLEASE FILL OUT ENTIRELY

## ADOPTION AGREEMENT

BY ADOPTING THIS ANIMAL, I AGREE TO THE FOLLOWING TERMS NON-NEGOTIABLE :

I. TO ALWAYS PROVIDE PROPER AND NECESSARY CARE AND TREATMENT FOR THE ANIMAL I HAVE ADOPTED, INCLUDING BUT NOT LIMITED TO HUMANE TREATMENT, SHELTER, FOOD, LOVE, AND VETERINARY CARE. THE ANIMAL WILL NOT BE KEPT

### Office use only

Pet name \_\_\_\_\_ ARN \_\_\_\_\_ Adoptions Date \_\_\_\_\_ Alter apt \_\_\_\_\_

CONTINUALLY IN A CAGE, YARD, PEN, HUTCH, OR GARAGE OR ON A TETHER OR BE ALLOWED TO ROAM OFF OF THE OWNER'S PROPERTY.

2. MCHS ABSOLUTELY UNDER NO CIRCUMSTANCES CONDONES ANY OF OUR CATS TO BE DECLAWED AT ANY POINT AFTER THEY ARE ADOPTED. IF YOU DECIDE TO GO AGAINST THIS PART OF YOUR SIGNED CONTRACT, MCHS RESERVES THE RIGHT TO CONFISCATE THE ANIMAL AND FIND IT A NEW, BETTER SUITED HOME.

3. THAT I AM:

- 18 YEARS OF AGE OR OLDER

- RESIDES IN THEIR OWN HOME OR IN A PET FRIENDLY APARTMENT COMPLEX AND HAS PROVIDED PROOF TO MCHS STAFF

- IS THE HEAD OF THE HOUSEHOLD OR CAN SPEAK ON THEIR BEHALF

- HAS CONSIDERED THEIR LIFESTYLE AND HAS THE TIME, PATIENCE AND IS FINANCIALLY RESPONSIBLE ENOUGH TO CARE FOR THIS ANIMAL FOR THE **NEXT 10 YEARS OR MORE** HAS INFORMED MCHS OF ALL MEMBERS OF THE HOUSEHOLD, INCLUDING SMALL CHILDREN AND ANIMALS. FURTHERMORE, THAT ALL MEMBERS OF THE HOUSEHOLD HAVE AGREED UPON THE SELECTION OF THE PET AND WELCOME THEM INTO THEIR HOME

-USING A MCHS APPROVED VET OR MADE AN APPOINTMENT AND INFORMED MCHS OF CHANGES AT MY OWN EXPENSE FOR MY ANIMALS' ALTER.

4. THAT MCHS RESERVES THE RIGHT TO INVESTIGATE, UNANNOUNCED, THE LIVING CONDITIONS OF ANY ANIMAL ADOPTED FROM US AND MAY RECLAIM ANY SUCH ANIMAL BEING KEPT IN VIOLATION OF THE ADOPTION AGREEMENT.

5. TO ABIDE BY THE STATE LAWS, CITY, AND COUNTY ORDINANCES REGARDING ANIMALS, INCLUDING LICENSING AND VACCINATING MY PET WITH THE CITY IT WILL BE RESIDING IN.

6. THAT THE PET WILL BE PROVIDED WITH A ID TAG OR REGISTERED MICROCHIPS WITHIN 24 HOURS OF TAKING THE ANIMAL HOME.

7. THAT THIS ANIMAL IS BEING ADOPTED AS MY OWN COMPANION ANIMAL, AND WILL NOT BE GIVEN AS AN UNANNOUNCED GIFT, RESOLD, OR USED AS A GUARD OR BREEDING DOG / CAT. **NOR WILL I SELL, RE-SELL, GIVE AWAY, HARM, MISTREAT, OR RELEASE THE ANIMAL IF I NO LONGER WISH TO KEEP IT.**

8. THAT ADOPTER IS TAKING FULL RESPONSIBILITY OF THIS ANIMAL WITH THE UNDERSTANDING THAT THERE IS **NO** KNOWN HISTORY ON THIS PET EXCEPT FOR THE ONES TOLD TO ME BY THE STAFF AT MCHS. IF IT IS FOUND THAT THE ANIMAL IS IN NEED OF TRAINING, **THE ADOPTER AGREES TO ENROLL THE ANIMAL IN TRAINING CLASSES TO TRY TO FIX ANY UNWANTED BEHAVIOR OR ACTIVITIES.**

9. THAT MCHS **DOES NOT GIVE REFUNDS OR EXCHANGES** FOR THE RETURN OF ANY OF THE ANIMALS AFTER 7 DAYS, AND THE RETURN OF MULTIPLE ANIMALS WILL RESULT IN BEING ADDED TO THE DO NOT ADOPT TO LIST.

10. THAT ANY ANIMAL ENTERING A NEW HOME WILL NEED SOME TIME TO ADJUST TO ITS NEW ENVIRONMENT; ADOPTER AGREES TO GIVE THE ANIMAL TIME TO ADJUST BEFORE DECIDING WHETHER OR NOT THE ANIMAL IS WORKING OUT IN THEIR HOME.

**11. ADOPTER ALSO UNDERSTANDS THAT THEY HAVE 1 WEEK TO DECIDE IF THEY WANT TO KEEP THIS PET. OR NEEDS TO RETURN FOR LEGITIMATE REASONING. THE PET CAN BE RETURNED TO MCHS, WITHOUT PAYING OWNER RELEASE FEES. ANY ANIMAL RETURNED AFTER THE 1 WEEK CAN ONLY BE ACCEPTED IF SPACE IS AVAILABLE AND THERE WILL BE OWNER RELEASE FEE IN ORDER TO DROP IT OFF.**

**By signing this I agree that I have read and understand the terms of this agreement and will not violate or claim ignorance of what I have signed.**

NAME / DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

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