

Fond du Lac Humane Society

DOG ADOPTION APPLICATION **APPROVE** **DENY**

Date _____ Pet Name _____ Pet ID # _____ Adoption Counselor _____

We sincerely hope we can be of service to you. We ask that you fill out your application completely. The application is designed to help us determine if the adoption is in the animal's best interest, and to assist the potential adopter in finding an animal most compatible with his or her lifestyle. We hope you will agree that the animal's welfare must be our foremost consideration.

In order to be considered as an adopter today, you must meet the following requirements. Please initial each showing that you understand.

- Be at least 21 years of age.
- Have the knowledge and consent of all adults living in your house.
- Have verifiable identification.
- Understand that the FDLHS has the right to deny or accept your application.
- Realize that although we will give your application full consideration, we do not adopt on a first come, first serve basis. The animal will go to the family that can provide the *best* home.
- Understand that all current pets (dogs/Dogs) must be spayed/neutered, **BEFORE** bringing your new pet home.

Please Print

Last Name _____ MI _____ First Name _____ Date of Birth _____
 Spouse or Roommate's Name w MI _____ Date of Birth _____
 Address _____
 City _____ State _____ Zip _____ How Long At Present Address? _____
 Previous Address, if Less Than 2 Years _____ How Long? _____
 Area Code / Home Phone _____ Work Phone _____
 Email _____
 You live in: (check one) House __ Apartment __ Condo __ Dorm __ Other _____
 You live with: (check one) Parents __ Other __ I rent __ I own __

Landlord's Name and Phone _____ Verified _____

Staff Note:

Employer/Position Held? _____

Personal References #1 (Please List A NON-RELATIVE)

Name:	Address:	Phone:
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Staff Note:

Personal Reference #2 (Please List A NON-RELATIVE)

Name:	Address:	Phone:
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Staff Note:

Veterinarian's Name/ Phone: _____

Staff Note:

What types of pets have you owned in the past and present?

Name	Breed	Age	Gender	Spayed/Neutered? If NOT, Why?	Still Own?

If you no longer have the above pet(s), please explain what happened to them: _____

Have you applied to adopt or adopted from the FDLHS before? Yes ____ No ____

It may take up to a month or longer for your new pet to adjust to other pets in its new home.

Are you prepared to allow it this much time? Yes ____ No ____

Does any member in the household have allergies to pets? Yes __ No __

How many members in the household & ages? _____

Which member of the household will hold primary responsibility caring for your pets?

Feeding _____ Training _____ General Care _____

Was your entire family involved with selecting the new pet? Yes __ No __

Has anyone in your household ever been convicted of a charge related to cruelty to animals or child abuse?

Yes __ No __ Any charges pending? Yes __ No __

Please tell why you would like to adopt an animal from us?

Gift __ Companion __ To Breed __ for a child __ Companion for Other Pet __ Other _____

Have you ever brought an animal into a Shelter? Yes __ No __

If so, for what reason? _____

Are you looking for a primarily inside _____ or outside _____ dog?

Where will your Dog be kept during the day? _____ Night? _____

Will your Dog be exercising outdoors? Yes __ No __ How many hours per day/week _____

Do you have a fenced in yard? Yes __ No __

Are you willing to work on house training? Yes __ No __

What characteristics in a Dog are you looking for? _____

Do you prefer a specific color/gender? _____

By signing below, I certify that the information I have given is true and that I recognize that any misrepresentation of facts may result in my losing the privilege of adopting a pet. I understand that FDLHS has the right to deny my request to adopt an animal and I authorize investigation of all statements in this application.

Signature _____ Date _____

ALL INFORMATION CONTAINED IN THIS APPLICATION WILL REMAIN CONFIDENTIAL AND THE PROPERTY OF THE FDLHS.

All Dogs MUST have a leash, before they can leave the shelter.

Approved Applicant Waiver

***As a FDL Humane Society applicant, I understand that I will be handling animals. I understand that in handling animals I may undertake any number of risks. I understand that in assuming this I may be exposing myself to potentially significant health risks or serious medical conditions, including, but not limited to: injuries from slips and/or falls, bites and scratches, infectious diseases, parasites, and allergic reactions (e.g. rabies, fleas, ringworm, and asthma).**

***Since many animals that come to the FDL Humane Society are from unknown backgrounds and are therefore ultimately unpredictable, I am thus aware that the FDL Humane Society is not in a position to know and makes no representations with the temperament, health or condition of any animal. In particular. I must rely on my own judgment and I understand and agree that by handling the animal, as an applicant I do so at my own risk.**

***Therefore, I agree to hold harmless, the FDL Humane Society, its employees, volunteers, agents, or directors, whether collectively or individually, for any injury or liability the animal(s) may cause to me. I further assume any and all liability for damages or to other persons, which may be caused by any animal(s) while in my care as an applicant, and hold the FDL Humane Society harmless therefrom.**

Please Print Name/Date: _____

Signature: _____ Witnessed By: _____