



Wolf Pack Dog Training and Animal Care

Application for Adoption

Date: _____

Today I make a commitment and enter into an agreement to care physically, emotionally and financially for a feeling, sensitive animal for its lifetime.

To be considered as an adopter, you must be 25 years of age, have the approval of all adult household members, have a valid identification with current address and, if applicable, have landlord's approval. **Adoption fee is \$200 cash or bank check**. Your adoption fee includes spay/neuter and various vaccinations.

Personal Information:

- 1) Name: _____
- 2) Date of birth: _____
- 3) Do you: Rent Own
Do you live in a: House Condo Apartment
 Parent Dorm Roommates
- 4) Number of adults in household: _____
Number of children: _____ Ages of children: _____
- 5) Do you: Work Attend school Stay at home
- 6) Is there a pet limit where you live? Yes No
- 7) Employer name/address/phone: _____

- 8) Landlord name/address/phone: _____

- 9) Are you currently in the Armed Forces? Yes No
- 10) How did you hear of **Safe Haven or Wolf Pack Dog Training and Animal Care**
 Saw sign/came in to visit the shelter
 Recommendation of friend/colleague Advertisement
 Other: _____

Pet History and Expectations:

- 11) Have you adopted from **Safe Haven or Wolf Pack Dog Training and Animal Care**
 Yes No
- 12) Have you adopted from another animal shelter or rescue before?
 Yes No

Pet History and Expectations continued:

- 13) If you answered "yes" to 11 or 12, please describe your experience:

- 14) Have you ever surrendered an animal to us or to another animal shelter or rescue or to an animal control facility? Yes No
If you answered "yes," please explain:

- 15) Do you have a companion animal now? Yes No
What breed of dog? Dog Cat Other
Does it/do they live in your home? Yes No
Name/address of veterinarian: _____

- 16) What pets have you owned in the past five years? _____
- 17) Where is your last pet? _____
- 18) What is your main reason for getting an animal?
 Companion for you Companion for another pet Gift
 Watchdog Hunting Mouser Breeding Guard dog
- 18) How do you feel about spay/neuter? _____
- 19) Where will your dog or cat live? Indoor only
 Outdoor with dog house Indoor and outdoor
 Garage (unheated) Garage (heated in winter)
- 19) How many hours will your pet be alone each day? _____

Applicant Certification:

Print Name: _____
Address: _____
City/State/Zip: _____
Home Phone: _____
Work Phone: _____
E-mail address: _____
Driver's License State and Number: _____

By signing below, I certify that the information I have provided is true and complete. I understand that the adoption facility has the right to deny my request to adopt an animal, and I authorize investigation of all answers on this Application.

Applicant Signature: _____
Date: _____
Adoption Counselor Signature: _____
Date: _____