

ADOPTION APPLICATION

| DOG: | ID#: | DESC | RIPTION: | |
|--|-----------------|---------------------|------------------------|-----------------------|
| Name: | | Address: | | |
| City, State, Zip: | Home Phone: | | Email: | |
| Employer:Address: | | ldress: | | Phone: |
| 1. Why do you want a pet? | | | | |
| 2. How many people living in h | ouse? | Ages? | | |
| 3. Are any of these people allers | gic to dogs? _ | Does every | one consent to havin | g a dog in the house? |
| 4. Do you live in a (circle): | House | Apartment | Mobile Home | Other |
| 5. Do you live in the (circle): | City | Suburb | Rural | |
| 6. Do you (circle): | Rent | Own | Live with parent | S |
| 7. If you rent, please provide l | | _ | | |
| 8. Does your landlord allow you | | | | |
| 9. Do you have a lease? | _ When do | es the lease expire | e? | |
| 10. What happens to the dog wh | nen you move | ? | | |
| 11. Where will the dog be while you are at work? | | | | How long? |
| 12. Where will the dog sleep at | night? | | | |
| 13. Please list and describe the | other animals | in the house: | | |
| 14. Are the animals all spayed | | | | |
| 15. Are your dogs licensed? | Are all | your animals up | to date on vaccination | ons? |
| 16. Name, address & phone nur | nber of your V | /eterinarian: | | |
| 17. Do you give DHA permission | on to contact y | our Veterinarian | ? | |
| 18. How do you currently discip | oline your anir | nals? | | |



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| 19. Have you owned an animal in the past? |
|--|
| 20. Have you ever applied to DHA or adopted an animal from DHA in the past? When? |
| 21. If "yes" to questions 19 or 20, where is the animal now? |
| 22. If the animal died, please describe the circumstances: |
| 23. Do you have a fenced yard? Describe: |
| 24. Does the fence encompass the entire yard? Does a door in the house open into the yard? |
| 25. Do you plan to use a crate? Have you ever crate-trained a dog? |
| 26. Do you plan to take an obedience class with your dog? Have you ever taken any classes? |
| 27. How do you plan to exercise your dog? |
| 28. Do you understand the responsibilities & commitment of dog ownership - medical, feeding, grooming, adhering to the recommended vaccination schedule and not letting the dog run loose? |
| 29. Do you understand that children and dogs should not be left alone unsupervised? |
| 30. Will you educate yourself about and comply with all applicable Animal Control laws? |
| 31. How did you hear about DHA: |
| 32. Do you understand that routine veterinary care can be expensive for your pet? |
| 33. Do you understand that the adoption fee is non-refundable? |
| 34. Do you understand that if within 6 months from the date of adoption you are unable to keep the dog, that you must return the dog to DHA? |
| 35. Do you understand that if you need to give up the dog after 6 months, you must still contact DHA which will assess whether it has the resources to take the dog at that time? |
| 36. Do you understand that DHA does not operate on a first-come basis and will accept applications until we find the right match? |
| Signature: Date: |
| DHA By: Date: |