



## DOG ADOPTION APPLICATION

**Dog Chosen:** 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_

### Adopter's General Information:

\_\_\_\_\_  
Legal First Name Middle Initial Last Name Previous Name(s) if applicable

\_\_\_\_\_  
Street Address Home Phone

\_\_\_\_\_  
City, State ZIP Code Cell Phone

\_\_\_\_\_  
E-mail Birth Date (00/00/00) Work Phone

\_\_\_\_\_  
Occupation Employer Name/ how long employed there

### Property Information:

- House  Duplex  Apartment  Condo  Mobile Home  
 I own  I rent\*  I live with a parent/ guardian

How long have you lived at this address (years/months)? \_\_\_\_\_

\*\*If you rent, name of landlord/condominium manager: \_\_\_\_\_

\*\*Landlord phone: \_\_\_\_\_ \*\*Landlord E-mail: \_\_\_\_\_

Spouse/Roommate/Partner's Legal Name & Date of Birth: \_\_\_\_\_

Previous Name(s) if applicable: \_\_\_\_\_

\_\_\_\_\_  
Occupation Employer Name/ how long employed there

Names and ages of children (if applicable): \_\_\_\_\_

Does anyone in your home have allergies?  Y  N

If yes, who and type of allergy: \_\_\_\_\_

Who is the dog for?  Myself  My family  My children  Relative  Friend

Dog will be kept:  Indoors  Outdoors  Both indoors and outdoors

Do you have a fenced yard or an indoor/outdoor kennel?  Y  N

If no, are you planning to fence your yard, and if so, when? \_\_\_\_\_

If you found it was needed, would you be willing to fence in a portion of your yard?  Y  N

**If you had to describe your household, would you say it is (check all that apply):**



Barking \_\_\_\_\_

Chewing \_\_\_\_\_

Digging \_\_\_\_\_

Jumping \_\_\_\_\_

Nipping/ Play biting \_\_\_\_\_

Potty Training \_\_\_\_\_

Daily, how much time do you anticipate spending with your dog to provide exercise / playtime? \_\_\_\_\_

In an average year, how much do you estimate spending to provide (list \$ amount):

Vet care for your dog? \_\_\_\_\_ Flea/tick & Heartworm preventatives: \_\_\_\_\_

Food, supplies, toys, etc.? \_\_\_\_\_

What brand of food do you plan to feed? \_\_\_\_\_

**Why do you want to adopt this dog?** \_\_\_\_\_

**Additional Information:**

\* If you rent, a copy of your lease and addendum for pets must be provided to Orphan Animal Rescue.

\* By signing this adoption application, you agree to provide vaccinations, health check-ups and any additional veterinary care, by a qualified veterinarian, on a yearly basis.

\* Your adoption fee is a donation to Orphan Animal Rescue and is nonrefundable.

\* By signing this adoption application, if the pet is not already spayed/ neutered, you agree to have this pet sterilized. A deposit is required for nonsterilized animals, which will be returned to you upon receipt of a signed letter from your veterinarian indicating date of spay/neuter surgery.

\* When adopting a dog or puppy, **you must bring a leash, collar, and ID tag** along when picking up your new pet. Please contact the foster home for appropriate size collar to ensure the safety of your new pet.

\* Must be 21 or older to adopt.

By signing this form, I/we acknowledge that the information on this form is true and correct. I/we agree to all provisions indicated on this form. I/we understand that any misrepresentation of fact may result in Orphan Animal Rescue Inc. refusing adoption privileges to me/us. If my/our request for adoption is approved and later Orphan Animal Rescue Inc. discovers the above information is not true or correct, this application becomes null and void. Because of my breach of contract, Orphan Animal Rescue Inc. reserves the right to remove the adopted pet from my home, and I will be held responsible for any associated legal costs incurred as part of said reclamation process. In order to ensure the best homes for our rescued pets, we reserve the right to deny any adoption application.

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date

**How did you hear about OARS?**  Word of mouth  Petfinder.com  Adoptapet.com  OARS Web Site

Other (please describe): \_\_\_\_\_

*Thank you for applying to adopt a pet from Orphan Animal Rescue!*

*Please allow **48-72 hours** to process your application. We are 100% volunteer-run and appreciate your patience.*

**For Office Use Only:**

Approved  Not Approved

Reason: \_\_\_\_\_

\_\_\_\_\_  
Signature of Staff Volunteer

\_\_\_\_\_  
Initials of Staff/Volunteer

\_\_\_\_\_  
Date

Adoption Donation: \_\_\_\_\_

Payment Method: \_\_\_\_\_

Foster Home: \_\_\_\_\_