Name_____

Dog Adoption Application

Blackford County Animal Shelter PO Box 70, 2520 N- 200 E, Hartford City, IN 47348 Phone 765-348-5284 Fax 765-348-1002 www.blackfordcountyanimalshelter.com blackfordcountyanimalshelter@yahoo.com

Thank you for choosing to adopt a shelter pet.

Our staff and volunteers have an obligation to ensure that the animals left in our care are placed into responsible, loving forever homes. Our adoption process may take 2-5 days and this application must be filled out completely.

Name of dog(s) you are interested	in:				
Your name:	Phone:				
Address:	Alt Phone:				
email					
City:St	ateZip	DL#:			
How did you hear about our shelte	er?Newsle	etterWebsite	Reference		
	YOUR P	ERSONAL INFOR	RMATION		
Are you 20 years or older?y	/esno	Are you a stud	lent?yesno		
Do you live in ahouse I own	house I rent	apartment	_ condo mobile home		
Does your landlord allow pets?	yesno	ls there a weight li	mit or deposit? <u>yes</u> no		
Landlords name	F	hone			
Does everyone in your household know that your are planning to adopt a pet?yesno					
Number of children in your househ	old:Age	es:			
Is anyone in your household allergic to animals?yes no					
If yes please explain:					
Have you ever surrendered an animal to a shelter?yesno					
If yes, when and why:					

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Please list 3 references including at least 1 non-family member:

1. Personal reference	Personal referencePhone#			
2. Personal reference	Personal referencePhone#			
3. Personal reference		Phone#		
Is this your first time owning a pet?_	yesno			
C	URRENT AND PREVIOUS PET	INFORMATION		
Species/animals name: Age	spayed/neutered cu	urrent/previous	amount of time owned	
If any of the pets are no longer with	you what happened to themde	ceased, gave away	y, surrendered,etc	
If more than 3 please add on back o	f application.			
Are all current pets up to date on va	ccines? If not why			
Please provide name and phone nu		ded care for your c		
Have your current pets been around	other dogs?cats?	othe	ər?	
	ADOPTING DOG INFORM	MATION		
My reasons for wanting a dog <i>(chec</i> companion for pettother			for kids	
I would like my dog to haveshe	ort hairmed hair	no prefe	ence	
Age range:puppy6	mos-12 mos1-2 years	over 2 years	senior	

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 * Are you willing to work with behavior issues?yesno * Do you understand that this puppy/dog is not guaranteed to be housebroken?yesno * Do you have the means/funds to provide vet care for your pet?yesno * Are you committed to providing annual vet care for your pet?yesno * What would you do if your pet were diagnosed with an unexpected illness?
* I would return this animal for: <i>(check all that apply)</i> biting/nippingmovingallergiesimproper eliminationdon't have time forescape risk other
Where will your pet stay? inside the house in garage outdoor kennel fenced yard wherever I am on a chain or trolley outside all the time
Do you have a fenced yard?yesno What type of fencing?
If no, how do you plan to exercise or potty your dog?several walks dailychain outside for short intervals
I certify that all information I have given in this application for a companion dog is true and correct to the best

of my knowledge and belief. I give Blackford County Animal Shelter permission to contact the veterinarian(s) and landlord I have listed for the purpose of verifying information. I also understand that Blackford County Animal Shelter has the right to APPROVE or DENY any applicant based on the suitability and verification of the information included in this application and in accordance with policies established by the Board of Directors.

Applicant's Signature:_____ Date:_____

Our goal is to assist you in selecting a pet appropriate for your family and lifestyle and to ensure " a good quality of life" for each pet adopted.

Dedicated to the welfare of companion animals......"until they all have homes"