



Angels Helping Animals

Adoption Application

I am interested in adopting a: Dog Cat

Applicant Information

Name		Phone	
Address			
City		State	Zip
Email address			
Do you: <input type="checkbox"/> own <input type="checkbox"/> rent		Length of time at current address:	
Type of housing: <input type="checkbox"/> house <input type="checkbox"/> apartment <input type="checkbox"/> condo <input type="checkbox"/> other _____			
If you rent, please provide your landlord's name and phone number:			
Employment Status: <input type="checkbox"/> Retired/Self <input type="checkbox"/> Full time <input type="checkbox"/> Part- time <input type="checkbox"/> Unemployed			
Place of Employment		Phone	
Employment Address			

Household Information

Children under 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list ages below:
Other pets? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list types of pets and ages below:
Please list all members of the household, their relationship and ages:	

Pet Information

About how long will your new pet be alone each day?	Where will the pet be kept when no one is home?
For cats, I will: <input type="checkbox"/> keep indoors <input type="checkbox"/> keep outdoors <input type="checkbox"/> allow cat to go outside occasionally	
Where will the animal sleep?	
Does anyone in the household have allergies to pets? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what is the treatment plan?	

Vet Information

Do you currently have a vet? Yes No

If yes, please list vet's name and phone number:

How long have you been using this vet:

References

Reference #1 Name:

Phone:

Relationship

How long have you known:

Reference #2 Name:

Relationship

How long have you known:

Additional Information

Please add any additional information that you would like us to know:

Pet Owner Responsibility (please initial each statement)

_____ I will include our new pet as a family member and provide proper food, water and shelter, along with any medical needs it may require.

_____ I will provide regular veterinary care to the pet.

_____ If I am unable to keep the pet, I will return the pet to Angels Helping Animals (AHA).

_____ I will not rehome the pet without first contacting AHA.

_____ I will never abandon the pet or surrender, sell or give the pet to a shelter.

_____ I agree to allow AHA to make follow-up calls and/or visits.

_____ I hereby release Angels Helping Animals from any and all liability for injuries or damages to persons or property caused by this pet.

_____ I, the undersigned, have read, understand and agree to all terms in this contract.

AHA supports spay/neuter. All pets adopted from AHA will be altered as a part of the adoption process if they are old enough. It is the responsibility of the adopter to spay/neuter any pet that is not altered before adoption. You agree to have this done by the time the pet is five months of age. You agree that a veterinarian will examine all adopted pets within 14 days of adoption. AHA will not adopt a pet to a property where there is a prohibition against owning a pet by an owner, landlord, homeowners association, apartment manager, etc.

Angels Helping Animals reserves the right to decline an adoption application if we feel that the potential adopter's household is not the best fit for the pet.

Signature _____

Date _____