

HUMANE SOCIETY OF KENT COUNTY

SMALL COMPANION ANIMAL APPLICATION

Society Use Only

Adoption
Counselor

A
D

Home/Rent

Vet

Adults

Name _____ Date of Application _____

Address _____ City _____ Zip _____

Primary Phone _____ Secondary Phone _____

Name of **ALL** adults in household _____

Email Address _____ Permission for Adoption Follow-up? **Yes No**

Are you over 18 years of age? **Yes No** Are you a full-time college student? **Yes No**

Type of Pet Desired:

Rabbit Guinea Pig Hamster Rat Mouse Other _____

Why are you interested in adopting a pet? Gift Companionship Breeding Other _____

Household Information:

Is anyone in your household allergic to animals? **Yes No** If yes, what kind of animal allergy? _____

Number of adults in household? _____ Number of children in household? _____ Children's Ages _____

Circle any of the following who you live with or live with you. **Parents In-laws Friends Roommate(s) Spouse**

In which type of home do you live? **House Mobile Home Apartment Duplex Condo Other**

Do you **Own** or **Rent** your home? Landlord's Name/Phone #: _____

Pet History: List pets currently owned and owned in the past **5 years**, including small caged pets.

| Animal Type (dog, cat, other) | Name | Breed | Age | Sex M/F | Spayed or Neutered? (Y or N) | Kept Indoors? Or Outdoors? | How long owned? | Own now? Or Why Gone? |
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Name of Current Veterinarian or Clinic _____ Phone Number _____

Under whose name and what address are records kept? _____

Prior or Other Veterinarian or Clinic _____ Phone No. _____

Please provide a reference (other than a relative) who knows you as a pet owner. If you have never had a pet, provide the name of a friend or co-worker.

Name of Reference _____ Day Phone Number _____

Small Animal Care:

Have you ever owned the type of pet you wish to adopt? Yes No If yes, how long ago? _____

What happened to the pet? _____

Did the pet ever have offspring? Yes No If yes, what did you do with the offspring? _____

How will you house your pet? Loose in the yard Loose in the house Cage - Size: _____

Where will your pet be kept? Outside In garage Covered outside area In house

Who will primarily be responsible for the care of the pet? _____

Are you familiar with this pet's needs for: Food/Water _____ Socialization/Exercise _____ Vet Care _____

Do you have a preference of breed, age, or sex? _____

Certifications, Authorizations, Releases, and Understandings

1. I certify that all statements on this Adoption Application are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being allowed to adopt from The Humane Society of Kent County.
2. I authorize the Humane Society to contact my reference(s), my veterinarian(s) and anyone else The Humane Society deems necessary to confirm how I have cared for my companion animals and/or how I am likely to care for any companion animal(s) I adopt from The Humane Society.
3. I authorize my veterinarian(s) to release to The Humane Society all veterinary records of the animals I own or have owned.
4. I understand that, with proper care, cats can live 15 years or more and I am prepared to commit myself to the long-term care and protection of any animal I adopt from the Humane Society.
5. I understand that animal(s) I adopt from The Humane Society may require veterinary medical or health treatment beyond that provided by The Humane Society prior to my taking the animal(s) home. Such additional veterinary medical treatment could be costly. I acknowledge that The Humane Society is not responsible for providing any additional veterinary treatment or the incurring cost of any additional veterinary treatment provided by veterinarians I select to provide such treatment.
6. I will not sell or give away animal(s) I adopt from The Humane Society of Kent County. As long as I live in the service area of The Humane Society of Kent County, I agree to return the animal (s) to The Humane Society of Kent County in the event I cannot keep or chose not to keep the animal(s). If I move from the area, I agree to take the animal(s) to the local humane society or comparable local animal welfare organization.

_____ Date

_____ Applicant's Signature