

Adoption Application

www.Dream4pets.org



Welcome! In order for us to help place a pet with you that is best suited for you and your lifestyle, please take a moment to fill out this adoption application.

Your Name _____

Your Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work or Cell Phone _____

E-Mail _____

How many adults in the home ? _____

How many children in the home _____ Please list their ages: _____

How many pets do you currently own: Dogs: _____ Cats: _____ Other _____

Your pets: breed, gender, age, and disposition with other animals:

_____ Spayed or Neutered ?

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How did you obtain these pets _____

Please list the name and phone # of your veterinarian:

Do you own or rent your home ? _____

● Landlord's name _____

● Landlord's phone _____

Do you have a fenced yard? Yes No If yes, what kind? _____

A home visit is required before adoptions are approved, are you willing to have a home visit ? Yes No

SPAY and NEUTER is required within 2 months of adopting this pet. Are you willing to commit to this ? _____

Name of DOG you would like to adopt : _____

I would like a dog that is (please circle all your preferences):

- Young (puppy - 2 yrs) Middle age (3 - 5 years) Older (6 and older)
- Very Active Somewhat Active Pretty Mellow
- Good with cats Good with dogs Good with kids Doesn't matter
- Already Spayed / Neutered I will spay / neuter within 3 months

How do you plan to exercise a new dog?

Walk on leash Play in yard Kennel/run Other _____

How many hours a day will your new pet spend alone ? _____

Do you intend to keep your pet inside ? _____ If not, where _____

Where will your new pet stay when you are not home ? _____

Have you ever used a training crate with a puppy or a dog? Yes No

Have you ever taken a puppy or dog to training classes? Yes No

What circumstance or problem would cause you to "give up or return" your new pet ?

Please provide 2 references (not relatives) who have personal knowledge of your experience with animals.

Personal Reference # 1 _____

Address _____

Phone (home or cell or both) _____

How does this person know you ? _____

Personal Reference # 2 _____

Address _____

Phone (home or cell or both) _____

How does this person know you ? _____

I certify the information I have given is true, and I realize that any misrepresentation of facts may result in my losing the privilege of adoption a pet. I understand you have the right to deny my request to adopt an animal for any situation or not in the best interest of the animal. I authorize investigation of all statements in this application, and also authorize my vet to release any information requested by you .

Your signature _____ **Date** _____

Please return form to: **D.R.E.A.M. P.O.Box 1455 Piqua, OH 45356**