PET ADOPTION APPLICATION

HUMANE SOCIETY OF WARREN COUNTY

FOR OFFICE USE ONLY
Approved: Yes ____ No ___
Staff Initials ____ Date ___

1245 Progress Drive ~ Front Royal, VA 22630

Phone: (540) 635-4734 ~ Fax: (540) 635-0262

Email: info@humanesocietywarrencounty.org ~ Website: www.humanesocietywarrencounty.org

I would like to adopt a/an: Cat _____ Other ___ Name of animal, if known: Name: ____ Street Address: _____ City: ____ State: ____ Zip Code: _____ Telephone number: _____ (Home)_____ (Cell)_____ Email Address: Are you over 18 years of age?_____ Whom is the pet(s) for? Self _____ Gift ____ If a gift, for whom?_____ How many hours will the pet be alone each day?_____ How many adults live in your home?_____ How many children live in your home? _____ Ages of children?_____ Who will be responsible for the pet? Do you: Own _____ Rent _____ (includes living with parents rent free) House _____ Apartment ____ Mobile Home _____ If renting, does your lease allow pets? Yes _____ No ____ Name of landlord: _____ Telephone Number: _____ Do you have use of a private yard? Yes _____ No ____ Is the yard fenced? Yes_____ No _____ Where will your pet(s) sleep at night? Any allergy to pets? Yes _____ No ____ Have you ever been convicted of a charge of animal cruelty, neglect, or abandonment? Yes _____ No ____

PET ADOPTION APPLICATION (con't)

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Sex

Age

Spayed/neutered

Yes

No

Kept indoors/outdoors/both

Please list all pets in your household:

Name

Dog (breed), cat

or other

		Yes No	
		Yes No	
		Yes No	
		Yes No	
Have you had dogs or cats in the past five (5) yea			
Have you ever adopted from this shelter? Yes	No		
If yes, where is the pet now?			
Veterinarian's Name:	Phone:		
Address:	City:	State:	Zip Code:
According to the ASPCA, the annual financial respup to \$875 for a larger dog. The annual cost to catime costs such as spay/neuter fees, collars, leash	are for a cat is appro	ximately \$670. These o	
I certify that the above information is true and ur understand that this application does not constit first come, first serve basis. Our adoption decision compatibility of the family and home to the indiv	ute a "hold" on any a ons are dependent o	animal. I also understa n many factors, includir	nd adoptions are not on a ng but not limited to the
Adopter's Signature:		Date:	
	FOR OFFICE USE ON	ILY	
Veterinarian Reference Check			
Name of pet(s) on record?			
Are all of the client's pet(s) on record spayed or neutered?			
Are all of the client's pet(s) on record current on their vacce (Pet has to have a current rabies vaccination.)	inations?		
Verified by: Date:		_	
Landlord Verification:			
Yes: No: Verified by: Sta	Date	:	