

WEST HARDY ANIMAL RESCUE ADOPTION APPLICATION

Fields marked with an * are required

Date *

First Name *

Last Name *

Email *

Street *

City *

State *

Zip Code

Location/Nearest Crossroads

Home Phone

Work Phone

How did you become aware of us?

How long have you lived at the above address?

Please indicate the type of dwelling that you live in:

- House
- Townhouse
- Apartment/Condo
- Mobile Home
- Other

If you live in an Apartment, on what floor do you live?

The next three questions apply only to dogs.

Do you have a yard?

- Yes
- No

Size of yard?

Is your yard fenced?

- Yes
- No

Do you own or rent your home? *

Own

Rent

If renting, does your lease allow pets?

Yes

No

How many adults are in your household?

How many children are in your household?

Is there anyone home during the day?

Yes

No

Is this your first experience with a pet?

Yes

No

Do you currently own other pets?

Yes

No

Please check the type and enter the number of pets

Dogs _____

Cats _____

Other _____

If yes, are they up to date with their vaccination boosters?

Yes

No

Are you planning on declawing your cat?

Yes

No

N/A, if this is for a dog adoption.

If you plan on declawing your cat, why?

What type of pet are you interested in adopting?

- Puppy
- Dog
- Kitten
- Cat

Any specific breed or mix? _____

What age range?

- Under 1 year
- Under 2 years
- 2-5 years
- 5 years or older

What size?

- Under 15 lbs
- Under 30 lbs
- Under 50 lbs

If you have any specific animal(s) in mind, please list name(s):

Please list your reason(s) for wanting to adopt an animal:

Where will this pet be primarily living? *

- Inside
- Outside

Where will your pet sleep at night?

Type of exercise are you planning to provide a dog?

How often do you plan on exercising your dog?

References

Who is your veterinarian?

Veterinarian's Phone:

If renting, please provide your landlord's name:

Landlord's Phone:

(Please note: We require confirmation of approval from your landlord before showing animals)

Other References (2)

Name

Phone Number

If you adopt an animal from WHARAP, will you agree to the following:

I agree to:

Provide proper food, fresh water, weatherproof, clean shelter and humane treatment to the animal

Keep my pet on my property or within my control at all times

Keep the adopted pet current on all health check-ups & vaccinations

Purchase a properly fitted collar and license (if required) for your specific area

Not to tie or chain the pet as a primary means of confinement

Give a reasonable amount of time to allow the pet to adjust to your home

Notify WHARAP should I need to surrender the animal and cannot find a new home

Did you have a specific amount of time in mind for adjustment?

Do you have any other questions or concerns?

What reasons may you have for returning an animal

Signature of Applicants _____ Date _____

_____ Date _____

Signature of home owners or renters (if different from applicant)

_____ Date _____

_____ Date _____