

## **Dog Adoption Application**

Name:	Date:	
Address:		
City, State, Zip		
Phones (Including Area Code):		
Home:	Cell:	Work:
Email Address:		
Have you ever owned a dog?	Yes	No
If yes, what happened to it?		
Do you have other pets?	Yes	No
Please list all animals in your hou	sehold and their ages:	
Are your current pets spayed or neutered?	Yes	No
Are your current pets up to date on vaccinations and medical check ups?	Yes	No
What type of pet are you looking f	for? (Please circle all that applies)	
Family Pet Male Younger Dog	Exercise Buddy Female Older Dog	To hold and cuddle (lap dog) No Preference No Preference
What traite/characteristics are you	Llooking for in a dog?	

How many people reside in your home?		
Please list ages	Years	Years
	Years	Years
	Years	Years
	Months	Years
Are all family members in agreement with this adoption?	Yes	No
Do you rent or own your home?	Rent	Own
If you rent can we verify with the landlord that pets are allowed?	Yes	No
If yes, please provide contact infor	mation:	
Do you have a fenced yard?	Yes	No
Have you checked for escape routes?	Yes	No
Approximate height and descriptio	n of fence (wood,cyclone):	
How will you exercise your \dog?		
How many hours will your dog be at home alone?		
Where will the dog stay while he/she is home alone?		
Where will the dog sleep at night?		
Faced with an emergency situation, who will care for your pet?		
If you travel and can't take your pet, where will he/she stay?		
If your circumstances change (moving, birth of baby, marriage, divorce) what becomes of the pet?		
References: Veterinarian: Name: Address (City, State, Zip) Telephone Number		

We, at A New Dawn Pet Adoption appreciate your consideration of adopting one of our shelter pets. Please understand that all applications will be reviewed individually and that there may be more than one application for a certain animal. We will do our best to find the "best fit" with the information you have provided. We hope you will enjoy your new friend for years and years to come.