



Adoption/Foster Application

Date: _____

Seeking to: Adopt Foster

Personal Information

Name: _____

Maiden or Birth Name: _____

Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

County: _____

Length of residency at current address: _____ Years _____ Months

If at current residence less than one (1) year, please list most recent previous address:

Valid Email address: _____

Daytime Phone: _____

Evening Phone: _____

Other Phone: _____

Preferred Phone: Daytime Evening Other

Best time to call: _____ AM/PM to _____ AM/PM Anytime

About Your Household

Please list children and ages in household:

Names and dates of birth of other adults in your household:

Do you or anyone in the household suffer from allergies/asthma? Y N

Has anyone in the household ever been convicted of a felony or a crime against animals? Y N

If yes, please explain: _____

Which of the following best describes your residence?

House	Rent	Own
Condominium	Rent	Own
Farm	Rent	Own
Mobile Home	Rent	Own
Apartment	Rent	Own
Other:	_____	

If you rent, please list your landlord's name, address, and phone number:

Have you or anyone in your household ever been evicted from a residence?

If yes, please explain: _____

Do you have a fenced yard? Y N

If yes, type and height: _____

Desired Pet

Pet you are looking for: Adult Dog Puppy Adult Cat Kitten

Name(s), if specific animal(s): _____

Breed: _____ Sex: _____

Weight: _____ Age: _____

Is this pet a gift for someone else? Y N

Reason for wanting a pet: _____

Will the pet be kept inside or outside? _____

If outside, for how long of a period of time? _____

When outside, what housing/provisions do you plan to provide? _____

Where will the pet sleep? _____

Are you willing you spay/neuter the pet? Y N

How many hours will the pet be alone per day? _____

Where will the pet stay while you are not at home? _____

Who will be responsible for the pet on a daily basis? _____

Will the pet travel with you? _____

If no, where will the pet stay? _____

Are you willing to pay \$500 or more for veterinary care for your adopted pet if necessary? Y N

Current Pets

Please list Name, Type/Breed, Sex, Inside or Outside, Age and county license number:

Name of Veterinarian and Phone: _____

Have you had pets in the past other than those listed above? Y N

If yes, where are they now? _____

Have you ever given up an animal for any reason? Y N

If yes, please explain: _____

Additional Information

Personal Reference – Please list Name and Phone:

Additional Comments or Information:

Thank you for filling out our application. Someone will contact you within 7-10 days.

**A.D.O.P.T. Pet Rescue, Inc.
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www.adoptpetrescue.org**