

Animal's Name _____ Intake # _____ Date _____ Time _____



ADOPTION APPLICATION

Please print plainly. This application must be completed in its entirety.

Name _____ Home Phone _____ Work _____

Address _____ City _____ State _____ Zip _____

Email Address _____

I am aware that by declining to provide my e-mail address I forfeit my 30-day free 24PetWatch pet insurance gift.

How did you hear about Heart of the Valley? _____

Type of residence: House Condo Apartment Trailer Other (explain) _____

How long do you plan to live at this residence? _____

Landlord's Name _____ Phone _____

Number of adults in the home _____ Number and ages of children in the home _____

Have you adopted from us before? _____ If yes, when/ whom? _____

How much do you plan to spend on your new pet in a one year span? _____

How much one on one time do you plan spending with your pet each day? _____

Are there other pets in the home? _____ If yes, list number and type _____

Are your pets spayed/neutered? _____ Have you ever owned a cat or dog before? _____

Why do you want this particular animal? _____

How will you correct your animal if it misbehaves? _____

What behaviors do you find unacceptable in pets? _____

For what reason would you surrender an animal? _____

Do you have a completely fenced yard? _____ What type? _____ How high _____

Do you plan on declawing, removing dewclaws, or any other altering of your new pet? _____

My activity level is: Low Medium High

What is the longest period your pet will be left alone? _____

Are all members of your household in favor of adopting a pet? _____

Alternate Emergency contact for microchip registration (different person than the adopter):

Name _____ Relationship _____ Phone _____

By signing below, I certify all the information I have provided herein is true and correct to the best of my knowledge. I understand that providing false or incomplete information may be grounds for my adoption to be denied. I understand that this Adoption Application is not a binding contract with Heart of the Valley, Inc. and that at any time I may be denied adoption at the discretion of Heart of the Valley, Inc. I further certify that I will be the primary caregiver of this pet.

Signature _____ Date _____ Approved/Denied by _____

	Notes	Done?	Initials
Dog Intro			
Cat Test			
Family Intro			
Landlord check			
ID check			
PetPoint check			
Medical evaluation disclosed			
Behavior evaluation disclosed			
Surrender history disclosed			

Notes: