## WCAS Pet Adoption Application

## Name of Animal:

$\qquad$ Dog/Cat: $\qquad$ Date: $\qquad$

In order to be considered as an adopter you must:

- Be 21 years of age or older.
- Have identification showing your present address.
- Have the knowledge and consent of your landlord.
- The pet you have chosen must fit within any weight and requirements your landlord or community may have, including breed restrictions. (Remember, puppies get bigger!)
- If you already own animals, they must be up to date on their core vaccines, including but not limited to rabies and other current preventions.
- Be able and willing to provide a loving, safe and peaceful environment for this pet.
- Be financially stable and willing to provide any necessary medical care.
- You cannot currently be in violation of the animal control ordinance, and you cannot have had any serious animal control ordinance violations in the past.
- REQUIRED VACCINES:

1. Rabies (Must be administered by a licensed veterinarian)
2. DAPP/DAPP2/DHPP
3. Bordetella
4. $<6$ Months must have Parvo Testing
5. $>6$ Months must have heartworm testing or 6 months of preventative

Pet ownership is a serious responsibility. The policy of this adoption group is to ensure that each person who adopts a pet is aware of the responsibility and is capable and willing to accept that responsibility morally, physically, and financially.

The following questionnaire has been designed to aid both you and the adoption group in deciding if you and/or your family are adequately prepared to assume the responsibility of pet ownership and to help place pets in a proper home. Please be sure to ANSWER ALL QUESTIONS and feel free to add your own comments. If a question does not apply write N/A.
$\qquad$
Phone: $\qquad$ Other Phone: $\qquad$ Other Phone: $\qquad$
Email: $\qquad$ What is the best way to contact you? $\qquad$

Address: $\qquad$ City/State: $\qquad$ Zip:

Occupation: $\qquad$ Spouse's Occupation: $\qquad$

Please list the name, age and relationship to yourself of each person currently living in your house (i.e.- Mary, spouse 35)

Does anyone living in your home have any known allergies?


Yes $\square$
Your type of dwelling: $\square$ House $\square$ Condo $\square$ Apartment $\square$ Townhouse Length of time at residence:

Do you plan to move within the next 6-12 months? If you rent, are pets allowed? $\quad \square$ Yes $\quad \square$ No
$\square$

Pet Deposit? $\square$ Yes No How much?

What is the name of the property owner/ agent? $\qquad$
Contact name and phone number: $\qquad$
Why do you want to adopt at this time? $\square$ Companion for you / family / another pet $\square$ Guard Dog


Where will your new pet sleep at night? $\qquad$
In what areas of the house will the dog/cat be allowed?




Where do your pets stay if and when you travel? $\qquad$

## PAST/PRESENT PET HISTORY.

Please list the name, type, age, gender, and if pet is spayed or neutered of all current animals. (i.e.- Duke, yellow lab, $1 \mathbf{1 / 2}$ years old, male neutered)

Please list age, type, gender and if the pet was spayed or neutered for all animals you no longer have and what happened to that animal. (i.e.- Rosie, German Shepard, spayed female, died of old age) $\qquad$

Are your companion animals spayed/ neutered? $\quad \square$ Yes $\square$ No
If not, why?


No
 Date of last vaccinations: $\qquad$ Not Applicable How often do you think a dog/cat should go to the vet for routine care?

Name of current or last veterinarian? Name/phone number? $\qquad$

May we contact this vet as a reference? $\square$
$\square$

What would you do with your pet if you could not keep it for the reasons stated above? $\qquad$ Have you ever surrendered a pet to a shelter/pound?

$\square$ If yes, why?

Do you have a relative who would adopt the pet if you, for any reason, become incapable of caring for him/her? If yes, please provide name, address, phone number and relation: $\qquad$
$\qquad$

Would you allow an inspection of your home and/or yard? $\square$ Yes $\square$

## PLEASE PROVIDE TWO PERSONAL REFERENCES:

Name: $\qquad$ Phone: $\qquad$ Email: $\qquad$

Name: $\qquad$ Phone: $\qquad$ Email:

How did you hear about Williston Community Animal Shelter? $\qquad$

Is there anything else you would like to tell us that you think would be important when considering your application? $\qquad$
$\qquad$
$\qquad$
$\qquad$

Please read and sign below: Many factors determine which applicant will be matched with a particular pet. If you are not able to adopt a pet today, it does not mean that you are not considered a good pet owner or that your home is not acceptable. Our goal is to place all animals into homes that will best suit their individual needs. Please ask for clarification if you have any questions.
$\square$ I have completed this application truthfully and fully understand the adoption process.

Signature: $\qquad$ Date: $\qquad$

If we do not call or email you within 7 days of receiving your application, it means that either:

1. The pet was adopted by a previous applicant.
2. We felt the situation presented on the application was not the right situation for that particular pet.

## Thank you for taking the time to complete this application

