

# Cottonwood County Animal Rescue - Adoption Application

Thank you for considering adopting a pet who needs a home! Please fill out this application as completely and accurately as possible.

Your Name \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What is the Applicants age? \_\_\_\_\_

Pet's Name \_\_\_\_\_ Today's Date \_\_\_\_\_ Pet's age \_\_\_\_\_

Name, City and State of the Vet Clinic you are currently using \_\_\_\_\_

Are your pets up-to-date on their vaccines? \_\_\_\_\_

Will this pet be part of your household? \_\_\_\_\_

Who will be the pet's primary caregiver? \_\_\_\_\_

What is your reason for adopting a pet? \_\_\_\_\_

Emotional Support? \_\_\_\_\_

How many children live in your household? \_\_\_\_\_

What are their ages? \_\_\_\_\_

Have you ever adopted a pet from Cottonwood County Animal Rescue?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever surrendered an animal to a rescue or shelter? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain the circumstances \_\_\_\_\_

If you are currently renting, do you have permission to have a pet? Yes \_\_\_\_\_

Landlord's name \_\_\_\_\_ Phone Number \_\_\_\_\_

Do you have any plans to move in the next six months? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, have you made plans for your pet? \_\_\_\_\_

If a situation should arise where you are unable to keep the animal in your home, you agree to contact CCAR to return the pet to us in order to find another home. This information is explained in more detail in the adoption contract.

How many pets are living with you currently? \_\_\_\_ Dogs \_\_\_\_ Cats

If you currently have pets, where are they kept? Inside \_\_\_\_ Outside \_\_\_\_ Both \_\_\_\_

Where do you plan to keep this pet? Inside \_\_\_\_ Outside \_\_\_\_ Both \_\_\_\_

\*Where will this pet be kept during the day? \_\_\_\_\_

\*Where will this pet be kept nights? \_\_\_\_\_

\*If adopting a dog, how will this dog be contained when outside? \_\_\_\_\_

How many hours per day will this pet be alone?

0-4 hours \_\_\_\_ 4-8 hours \_\_\_\_ 8-12 hours \_\_\_\_ 12 + hours \_\_\_\_

If adopting a dog that will be an outside dog, will this dog have protection from the weather and sun, such as a dog house or building? Yes \_\_\_\_\_ No \_\_\_\_\_

Place of employment \_\_\_\_\_

Phone number of employer \_\_\_\_\_

If not employed, do you have the resources to care for this animal? Yes \_\_\_\_\_ No \_\_\_\_\_

Please list two references:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_