

Adoption Application

DATE: _____

Animal ID # _____

Approved Denied Pending

Rabies Certificates YES – NO City Tags CURRENT – PURCHASE Landlord Approval/Consent of Other

I.D. VERIFIED (BY OFFICE): _____

PLEASE PRINT

Name: _____

_____ Date of Birth:

Last

First

MI

Street

Address: _____

City: _____ State: _____

Zip: _____

Primary Phone: (_____) _____ Alt Phone# (_____) _____ :Emergency#
(_____) _____

PLEASE PROVIDE THREE PHONE NUMBERS (THIS IS A REQUIREMENT TO REGISTER THE MICROCHIP WITH PETLINK)

Email

Address: _____

I live in a: House Duplex Apt Condo Townhouse Mobile Home

I Own Rent Live with parents/relatives

How many adults in your household? ____ Children & ages? _____
Landlord/Relative's Name: _____

Phone: _____

I am: Employed Retired Unemployed Where? _____ How Long? _____

Where will the animal be kept during the day? _____ At night? _____

Do you have a fenced yard? yes no What kind of fence? _____

Have you ever surrendered a pet to a shelter no yes -When _____ What kind of pet _____ What shelter _____ Please explain _____

Are you willing to make a 10-15 year commitment to your new pet? Yes No
What behavior would you be unwilling to work with? _____

What reasons might cause you to want to give this animal up? _____

List all pets that live in your household :

BREED OWNED	NAME	SEX	FIXED	AGE	WHERE KEPT	TIME
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_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	_____

Adoption Application

_____ Yes No _____

Please list your current veterinary clinic:

Name: _____

Phone: _____

Every adoption is first come first serve for an approved applicant.

By signing below, I certify that the above information is true and I recognize that any misrepresentation of facts may result in the loss of adoption privileges. I authorize investigation of all the statements in this application, and that veterinary providers and other shelters may release any information requested by Rogers Animal Services. I understand that the adoption of an animal will be delayed to enable Rogers Animal Services staff to process this application and to allow time for me to reconsider my lifetime commitment to the animal which I have selected. I understand that Rogers Animal Services has a No Return Policy.

I further understand that this application becomes the property of Rogers Animal Services, and that Rogers Animal Services reserves the right to deny any adoption application.

Signature _____ Date _____