



# Adoption Application

Animal Name: \_\_\_\_\_  DOG  CAT  Small & Furry

Application Date: \_\_\_\_\_ Call to Confirm Date: \_\_\_\_\_

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Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Best Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

1: I want a pet for:  Companionship  Companion for another animal  Protection

Other: \_\_\_\_\_

2: Do you:  Rent  Own  Live with parents

Landlord's/Parent's Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

3: Does anyone in your household have allergies?  Yes  No

4: Average hours per day the animal will be alone: \_\_\_\_\_

5: Where will the pet be kept? \_\_\_\_\_

6: Do you have other pets?  Yes  No

A. How many? Cats \_\_\_\_\_ Dogs \_\_\_\_\_ Other \_\_\_\_\_

B. Are they spayed/neutered?  Yes  No — If not, why not? \_\_\_\_\_

C. Are all pets current on vaccinations?  Yes  No

Rabies  YES  NO Distemper Vaccine  YES  NO Bordetella  YES  NO

7: Name of veterinarian: \_\_\_\_\_

8: Do you have children?  Yes  No If yes what ages? \_\_\_\_\_

Before adopting an animal from the Humane Society Waterville Area you must understand that you take a certain risk. We have screened the health, behavior, and temperament of each animal to the best of our ability during the time it has been in our care. However, there is always a chance that an animal is incubating a disease at the time of admission or adoption, without showing and clinical signs of illness.

HSWA reserves the right to deny any application.

I do authorize the Humane Society Waterville Area, located at 100 Webb Rd. Waterville, ME to contact the veterinarian listed on the application. I certify that the information provided is complete and correct to the best of my knowledge, and if it is discovered that any information is falsified my application will be denied.

Signature \_\_\_\_\_

# Microchip Information:

We no longer microchip our animals before their adoptions. Should you decide to purchase a microchip for your animal, we will register the microchip with your information as part of your adoption fee, but it is your responsibility to keep the microchip information up to date throughout the animal's life.

The emergency contact should be someone other than yourself, at a number different than yours. It should be someone who will always know how to contact you if your registered phone numbers become disconnected.

The microchip is registered through 24PetWatch.

Yes, I consent to release my information to anyone who may find my pet, including private citizens.

No, I prefer my communication only be through 24PetWatch. If 24PetWatch attempts to contact you and you cannot be reached, they will release your information to a Humane Society or Animal Control Officer.

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## Emergency Contact for purposes of microchip:

Name: \_\_\_\_\_

Best Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

### For Shelter Use Only

<input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth	Landlord/Parent call date: _____ by: _____
Application Date: _____	Landlord/Parent response: <input type="checkbox"/> Yes <input type="checkbox"/> No
Expected Pick-up Date: _____	
Membership card: <input type="checkbox"/> Yes <input type="checkbox"/> No	Vet call date: _____ by: _____
Application Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No by _____	Are all pets up-to-date? <input type="checkbox"/> Yes <input type="checkbox"/> No
Adoption Price: _____	Does adopter provide continuing care for their pets? <input type="checkbox"/> Yes <input type="checkbox"/> No

NOTES:

Revised: 8/20/14