

100 Webb Road Waterville ME 04901 Phone: 207-873-2430

Fax: 207-873-1266 www.hswa.org



## **Adoption Application**

When we, at the Humane Society Waterville Area (HSWA), place an animal for adoption, we hope to find a home that will last a lifetime and create a loving bond between pet and owner. Please take the time to answer a few questions that will enable us to find the right pet for you. We put a lot of love, care, time and finances into our animals, and we strive to get the best home possible for them, and a perfect match for you.

HSWA reserves the right to deny any application for any reason. Completing an application does not reserve an animal.

Animal Name		O Dog O Cat	O Small & Furry
Application Date		_	
Name		Are you over 18 years of age?	○ Yes ○ No
Mailing Address	Street	City/Town	Zip Code
Dhusiaal Addusaa	Street	City/ IOWII	Zip Code
Physical Address	Street	City/Town	Zip Code
Phone Number		Alternate Phone Number	
Email Address			
I want a pet for:	○ Companionship ○	Companion for Another Animal	<ul><li>Protection</li></ul>
	Other		
Do you: O Rent	Own Live with Parents		
If you rent, do you have	permission from your landlord to have	e a pet? O Yes O No	
Landlord's/Parent's Full N	Name:		
Landlord's/Parent's Telep	phone Number		
Does anyone in your hou	usehold have allergies? O Yes	○ No	
Average number of hours	s per day the pet with be alone?		
Where will the pet be ke	pt?		
Do you have any other p	ets? O Yes O No		
How many?	ats Dogs	Other	

Are your pets spayed/neutered?
If no, why not?
Are all of your current pets up to date on vaccinations? O Yes O No
Rabies? O Yes O No Distemper O Yes O No Bordetella O Yes O No
Name of veterinarian:
Please list the names and ages of all people in the household:
We, at HSWA, value the life of each and every animal in our facility. HSWA screens for health, behavior, and temperamer of each animal to the best of our ability during the time he/she has been in our care. However, there is always a chance that an animal may display behaviors later that were unseen at the shelter. In addition, an animal may be ill at the time of admission or adoption without showing any clinical signs of such illness. Please be aware that you are fully responsible for any expenses from the time of adoption forward.
I certify that the information provided is complete and correct to the best of my knowledge. I authorize HSWA to verification on my adoption application.
Applicant's Signature: Date:
with your information as part of your adoption fee; however, 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, and at a telephone number different than yours. It should be someone who will always know how to contact you if your registered telephone number becomes disconnected. The microchip is registered through 24PetWatch.  O Yes, I consent to release my information to anyone who may find my pet, including private citizens.
<ul> <li>No, I prefer my communication be only 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.</li> </ul>
Emergency Contact (someone not in your household) for the purposes of your new pet's microchip:  Name
Phone Number Alternate Phone Number
For Shelter Use Only
Notes: