



ADOPTION or FOSTER APPLICATION KiSS 4 Homeless Animals
DOGS

Tele # 702/275-5925 or 702/212-8500

- In order to be considered for an adoption, you must:
- Be at least 21 years of age.
 - Have the knowledge and consent of all adults living in your household.
 - Have landlord's consent to bring an animal onto the property.

We reserve the right to approve or disapprove any adoption or ask for additional references

Date: _____ **Pet Name:** _____ **Description:** _____

Applicant Information			
Your Name and Your Spouse or Partner's name: _____			
Home Street Address: _____			
City: _____	Zip: _____	Length of Time at this address: _____	
Home phone: _____	Cell phone: _____	Work or Other: _____	
Email Address: _____		Alternate Email: _____	
Number of People in Household: _____		Ages of children in the household, or visit often: _____	
Are the children good with animals? <input type="checkbox"/> Yes <input type="checkbox"/> No		Will you supervise children at all times with new pets? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you or any member of your family allergic to animals: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
Occupation and Employer: _____			<input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Student
Have you had pets in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No Type(s): _____			
Are these pets still with you? <input type="checkbox"/> Yes <input type="checkbox"/> No What happened to the pets you no longer have? _____			
Are these pets Spayed or Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know			
Are these pets current on vaccines? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know			
Have you ever turned a pet into a shelter? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____			
If you go out of town, who will care for your pet(s)? _____			
If for some reason you are no longer able to care for your pet, do you agree to contact KiSS immediately and return the pet only to us? <input type="checkbox"/> Yes <input type="checkbox"/> No			

General Information

Type of residence: House Apartment Condo Mobile Home Other: _____

<input type="checkbox"/> Own or <input type="checkbox"/> Rent?	If renting, are pets allowed and is pet deposit paid*? <input type="checkbox"/> Yes <input type="checkbox"/> No * A letter of permission from your landlord is required if renting	Max. Size: _____
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If you move, what will you do with your pet? _____

Are you financially able to properly provide for this pet? Yes No

How many hours per day will your pet(s) be alone?	How many hours per night will your pet(s) be alone?
Where will the pet(s) spend days? <input type="checkbox"/> Inside <input type="checkbox"/> Outside	Where will the pet(s) spend nights? <input type="checkbox"/> Inside <input type="checkbox"/> Outside

Do you have a safe, enclosed fenced yard? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please describe the type of fence you have: (height, size & style: chain link, privacy, invisible, pen, etc.)
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If no fence, what arrangements will you have for your pet's exercise and toilet duties?

Where will your pet sleep?
Where will pet be left when you are not home?

Your Current Pet Information

Clinic Name and/or Veterinarian's Name and Telephone:

May we call for a reference? Yes No

Do you currently live with other pets? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have these pets lived with other animals before? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name, Species, Breed of all pets currently living in your home (add attachment if necessary)	Age / Sex	Spayed/Neutered	Personality	Inside/Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Inside <input type="checkbox"/> Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Inside <input type="checkbox"/> Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Inside <input type="checkbox"/> Outside

References:

Please provide references of two people who have known you for 5 years or more, not in your immediate family:

Personal Reference: _____ Phone # _____

Personal Reference: _____ Phone # _____

Adoption Agreement:

(Please initial after each line ADOPTIONS ONLY)

1. I agree to provide the adopted animal with regular veterinary care. _____
2. I agree to keep an identification tag attached to a properly fitted collar that will remain on the adopted animal at all times whether inside or outside of the house, and to obtain all city licenses required by local authorities. I also agree to microchip the animal for further protection if it is not already micro-chipped. I agree to keep any contact information up to date with the microchip registration company. _____
3. I agree to have the Adopted animal under my control when he/she is not within the confines of my property. A secure fenced area will be provided for dogs, including shelter from the elements. If the Adopted animal is a cat, I agree to keep the cat as an indoor only pet and I pledge never to declaw the animal under any circumstances. The adopted animal will not be tied or chained. _____
4. If for any reason I cannot keep the adopted animal, I agree to notify KiSS for Homeless Animals of the availability of the animal, and to allow them adequate time to help me facilitate finding the animal an approved new home. This in no way legally requires KiSS for Homeless Animals to take the animal back. I will never take the animal to a shelter and will not re-home the animal without consent of KiSS4. Any adoption fees were paid as a "pay it forward" donation. _____
5. I agree not to abuse or neglect the Adopted animal and I authorize KiSS for Homeless Animals, at their sole discretion, to determine whether or not the Adopted animal has been abused or neglected. _____
6. I agree to give KiSS for Homeless Animals reasonable visitation rights to ensure that the terms of this adoption agreement are being observed. _____
7. I understand that any failure to perform the foregoing agreement will constitute a breach of contract. In the event of any such breach of contract, I authorize KiSS for Homeless Animals to reclaim both possession and ownership of the Adopted animal. I also understand that KiSS For Homeless Animals is not liable to me or any other party for any losses, injuries, damages, costs, expenses, lawsuits or judgments whatsoever in connection with my adoption of this animal. _____

Signature KiSS for Homeless Animals

_____ Date _____

Signature Adopter

_____ Date _____

Adoption Donation Amount \$

Cash - Check - Charge To:

CC#

Expiration/CVN:

Received Date: _____

By: _____