



Happy Tails Humane Society

1408 McNeil Rd • Rock Falls, IL 61071

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E-mail: happytailsadoptioncenter@yahoo.com

Application Approved Application Denied

**DOG
ADOPTION APPLICATION**

PLEASE COMPLETE ALL FIELDS ON THE APPLICATION

Date: _____ Name of the pet you are interested in adopting: _____

APPLICANT INFORMATION

First Name: _____ Middle Initial: _____ Last Name: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Phone (land line, if any): _____ Phone (cell phone, if any): _____

E-mail: _____ Years at this address: _____

Do you live with your parents or with roommates? Are you 21 years of age or older? Yes No

If less than 5 years at current address, previous addresses over past 5 years:

Address: _____ Years at this address: _____

City: _____ State: _____ Zip: _____

Address: _____ Years at this address: _____

City: _____ State: _____ Zip: _____

Employment

Name of employer: _____ Address: _____

City: _____ State: _____ Phone: _____

Hours of work schedule: _____ How long employed? _____

HOUSEHOLD/HOUSING

Number of other adults in your household: _____ Their names: _____

_____ Have all adults agreed to this adoption? Yes No

Ages of children in the household (if any): _____ Have the children had pets before? Yes No

Is anyone in the household allergic to pets? Yes No If so, what kind? _____

Do you own or rent? Own Rent

Type of dwelling: House Apartment Mobile Home Condo/Townhouse Duplex/Triplex

If renting, name of landlord or condo association: _____ Phone: _____

PET INFORMATION

Your current pets

Name	Species/Breed	Age	Gender	Spayed/Neutered?	Had how long?	Up-to-date on shots?

If you have a cat: Does it get along with dogs? Yes No Is it declawed? Yes No

If you have a dog: Does it get along with other dogs? Yes No Is it an indoor or outdoor dog? Indoor Outdoor

Are there any pets in the household that do not belong to you? If yes, please describe: _____

Pets owned over the past 10 years

Name	Species/Breed	Spayed/Neutered?	Owned how long?	What happened to this pet?	How long ago?	Vet you used?

Your new adopted pet

What are you looking for in your new adopted dog? Companion Hunting/herding Guard

Where will your dog spend most of his/her time? Inside Outside If outside, about how many hours per day? _____

When outside, how will the dog be confined? Chain link fence Privacy fence Invisible fence Dog run Tie out

When nobody is home, where will your dog spend his/her time? In the house, loose In the house, confined to one room In the house, in a crate In the yard In the garage About how many hours per day would your dog be alone? _____

What best describes the primary caregiver? (check all that apply)

Employed, full time Employed, part-time Stay-at-home parent/person College student Retired Child

In the absence of the caregiver, who will care for your dog? _____

Please describe the activity level at your home:

Busy (visits by friends, meetings, parties, etc.) Noisy (TV, stereo, children playing, dogs barking, etc.)
 Moderate (normal comings and goings) Quiet (homebodies, few guests)

Preferences

I am active and prefer a dog with a high energy level that loves lots of exercise and play.
 I am moderately active and prefer a dog for whom daily walks are enough exercise.
 I am not very active and prefer a dog who needs little exercise.

Bad dog habits I cannot tolerate: _____

What circumstances might justify giving up a dog? _____

Have you ever had to give up a pet? Yes No If yes, what was the reason? _____

Veterinary Records Release
Please print

I request that veterinary records for all of my pets be released to Happy Tails, Inc.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Owner's signature

Date