Domino Effect Animal Rescue Adoption Application

Email: info@dominoeffectanimalrescue.org

| Adopter's Name: | Date: |
|---|----------------|
| | |
| Phone numbers: | _ Cell: |
| Email address | |
| Name of animal you are interested in adopting? | 2 |
| Who is the animal for? | |
| Who will be the primary caregiver? | |
| Do you live in a house, a mobile home, or apart | ment? |
| Does your home have a fenced yard?Yes | _No |
| Do you own your home or are you renting? If renting, does your lease allow pets? Yes | |
| May we call your landlord? Yes No Lar | ndlord's phone |
| May we do a home check? Yes No | |
| How many hours would the animal be alone du | ring the day? |
| Where will the animal be left when alone? | |
| Will the animal be kept indoor, outside or both | ? |
| Do you have other pets at home? Yes N | 10 |
| If yes, list breed, sex, age | |

| If no, have you had pets before? Yes No If yes, what happened to them? |
|--|
| |
| |
| Do you have children? If yes, how old are they? |
| Do all members of the household know about and want a new animal? Yes No |
| If no, please explain: |
| I certify that, to the best of my knowledge, the information provided in this application is true and complete. I recognize that any misrepresentation of that information will result in my losing the privilege of adopting an animal from Domino Effect Animal Rescue. |

Signature _____

| Date | | | | | | | |
|------|--|--|--|--|--|--|--|
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*Completion of Adoption Application does not guarantee adoption of animal.