



MUCH ADO ABOUT HOUNDS, INC.
P.O. Box 871045, Stone Mountain, GA 30087

DOG ADOPTION APPLICATION

Name: _____

Street Address: _____

City: _____

State: _____ Zip Code: _____

Home Phone: _____

Work or Cell: _____

E-Mail: _____

Dog you are interested in adopting: _____

Employer's name/number: _____

Do you live with: Spouse/Partner ____ Roommate(s) ____ Parents ____ Alone ____

How old are you? _____ Spouse _____ Others _____

Does every individual in your home know you are adopting? _____

Do any individuals in your home have allergies to animals? _____

How often have you moved in the past 5 years? _____

References:

Please provide the name of your employer, clergyman, or anyone not related to you who can attest to your character. Vet references are preferred.

Name

Address

Phone

1. _____

2. _____

3. _____

Living situation and Lifestyle:

Is the home setting: Urban ____ Suburban ____ Rural ____

Do you live in a: House ____ Apartment ____ Condo ____ With family: ____

If you are renting, please provide landlord's name and phone number for verification:

PROOF MUST be provided before adoption: we reserve the right to call the landlord or apartment complex manager for verification.

Other pets and experience:

Please list pets that you have currently or have had in the last five years:

Name Breed Altered? Up-to-date on vaccinations? Where is pet currently?

What is the name of your past AND/OR current veterinarian/clinic?

The veterinarian's address/phone number.

Have you ever been convicted of animal cruelty, dog fighting, or other crime related to animals or children? Yes ____ No ____

If yes, explain: _____

Have you ever had an animal impounded? Yes ____ No ____

Was the animal ever reclaimed? Yes ____ No ____ If no, explain:

Have you ever given up a dog for any reason? Yes ____ No ____ If yes, explain:

For which of the following reasons would you give up your dog? Moving, divorce, financial, cat shedding, medical problems, not getting along with your kids, not getting along with other pets, aggressive, allergies, not under any circumstances.

Will your dog be inside only, outside only, or both inside and outside? _____

What percentage will your dog be indoors? _____

Have you ever surrendered a pet to a shelter? _____

Would you consider a companion for your dog/puppy? _____

Are you aware of the financial responsibility involved in owning a dog (high quality food, treats, toys, annual vaccinations, flea prevention, emergency costs, etc.) and are you prepared to take care of this dog for the duration of its life? Yes _____ No _____

Part of our adoption process includes visiting the dog's potential new home. Will you allow a representative to visit your home by appointment? Yes _____ No _____

By submitting this form, I certify that the answers in the above Dog Adoption Application are true. I understand that falsifying this application will cause the adoption process to be terminated. Please sign and date below.

Printed Name: _____

Signature: _____

Date: _____
