



Photo ID

21287 Boca Rio Road
Boca Raton, Florida 33433
(561) 482-8110

Name of Dog or Cat You Are Interested In adopting: _____ How did you hear about us? _____

Your Name: _____ Email Address: _____

Address: _____ Town, State, Zip _____

How long have you lived at this address? _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Employment: _____ Position/How long? _____

Do you own or rent? _____ Type of housing? _____ Single Family Home _____ Apartment
_____ Condominium _____ Townhome _____ Mobile Home

Sub Division Name: _____ *Please note that we cannot approve an adopter without direct verification of the pet policy*

If you rent, please provide the name and number of the landlord: _____

Number of adults in household: _____ Names and relationship: _____

Are you: Single _____ Married _____ Have Children _____ Ages: _____

Does anyone in your household have allergies or asthma? _____

If you do not currently have a pet, how long has it been? _____ What happened to your last pet? _____

Number of animals in household: _____ Breeds: _____ Names: _____ Ages: _____

Are your pets vaccines current? _____ Heartworm medication current? _____ Spayed/Neutered? _____

Veterinarian: _____ Phone Number: _____

Do you have a fenced in yard? _____ Where will your pet stay when you're not home? _____ How many hours alone? _____

If your pet becomes sick or injured, can you afford the medical costs? _____

If for some reason you can no longer care for your pet, what will you do with him/her? _____

If you need to move, would you find a place where pets are allowed? _____

Have you ever taken an animal to a shelter? _____ Reason: _____

Have you ever been charged or convicted for domestic or animal abuse or any other felony? _____

Signature: _____ Date: _____

OFFICE USE ONLY:

Reviewed By: _____

UTD: Yes / No

Sterilized: Yes / No

No Records on File: _____

Proof of Address: _____



Are ALL members of your household aware of and in agreement with this adoption? If not, please list who is not in favor of the adoption and the nature of their concern or objection.

Why do you wish to adopt this pet? Please check all that apply.

- Companionship
- My children will learn to be responsible for/care for another creature
- Love animals, want to help a pet in need
- Looking for a guard dog for home/property
- Companion for my other pet
- I would like to breed this pet
- I feel sorry for the animal
- The animal is so cute, I cannot leave him/her behind
- Gift for someone. If so, who?

What types of dog would you wish to give a permanent home to? Please check all that apply.

- A social dog
- A shy or timid dog
- High-energy dog
- Low-energy dog
- A dog with special needs
- Senior dog
- Physically challenged or handicapped dog
- A dog that needs training

What is your preferred level of exercise with this dog? Please check all that apply.

- Couch potato
- Yard exercise
- Short walks
- Vigorous walks
- Hiking
- Running partner

Please tell us about the pet's weekly schedule as it relates to your schedule. Which hours during the day will your pet be home alone? For example, if everyone is at work between 8 a.m. to 4 p.m.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday



When you are not home, where will your pet stay? Check all that apply.

- Anywhere inside the house
- Confined to a crate
- Designated area (closed room, gated area)
- Fenced in yard

Which of the following behaviors or characteristics present a problem for you?

- Jumping on furniture
- Chewing on shoes/furniture
- Shedding
- Pet not housebroken
- Barking/howling
- Jumping on people
- Digging

How would you address these issues?

Would you consider taking your pet to training?

Would any of these issues result in you returning your pet?

If your pet(s) were to survive you, who would take responsibility for them?

Signature: _____

Date: _____