

ALL PAWS RESCUE SERVICES

ADOPTION APPLICATION



NAME OF ANIMAL: _____

Microchip #: _____

Date: _____

Location: _____

Basic information

Name (First and Last): _____

Address: _____

City: _____ Postal Code: _____ Home Phone Number: _____

Cell Phone Number: _____ Email Address: _____

**** Please complete all information above fully and legibly. This is necessary to register the microchip ****

How did you hear about All Paws Rescue? _____

You and your family

Are you over the age of 18? YES NO

Do you have children? If so, please specify age _____

Are you currently working full time Part time attending school retired other

Does anyone in your family have allergies to animals? _____

Are you willing and **able** to cover the costs associated with pet ownership? (For example: spaying/neutering, vaccinations, unexpected medical bills, etc.) _____

Have you or any members of your household been charged with or convicted of neglect or cruelty to animals?

Why you would like to adopt a pet? Select from the following;

Companion to a person Companion to a pet For a child

For a retirement residence or facility For a Barn Other _____

What type of home do you live in? Select from the following;

House Semi Detached House Townhouse
Condo Apartment Shared/Room Rental

Other _____

Are pets permitted? _____ Do you own Rent Live with parents

Your current and previous pet information

Please provide us with information on your current and previous pets. Include your pet(s) name, breed/type, gender, whether they are neutered or spayed, micro chipped, declawed, indoor or outdoor, immunized and if you still own the pet:

Where did you get your current/previous pets from? _____

Do the current pets listed above currently live in your home? _____

If not, please specify why and what happened: _____

Do you have a pet carrying case? _____ Are you willing/able to purchase one? _____

What vet clinic do your current (or previous) pets go to? _____

Vet Clinic Phone Number: _____

The pet you have chosen to potentially adopt

Is there a specific animal you are interested in? _____

Do you plan to declaw your pet? *(If applicable)* _____

Will your pet be an indoor or outdoor pet? _____

What will you do with your animal if you need to move? _____

Are you willing to allow your new animal at least a month to adjust to its new home? _____

Have you ever brought one of your pets to an Animal Shelter or Animal Control, or given it away because you felt that you couldn't care for it anymore? _____ If yes, please explain why?

Will your pet have access to the entire home? _____

If no, explain why and where they will be confined: _____

In a few sentences, please describe what you think the basic needs for your animal will be, and what supplies you need to purchase before the animal arrived?

Are you aware that the adoption agreement with All Paws Rescue is a legal and binding enforceable document that requires you to be over 18 to sign? Yes

HOW YOU CAN HELP AN ANIMAL IN NEED

Would you like to make a cash donation to All Paws Rescue? *(In order to support our Rescue we rely solely on donations and fundraising by our volunteers – any donation is welcome)*

No Yes \$5 \$10 \$20 Other \$_____

Would you like to donate food or supplies to the All Paws Rescue? Yes No

(If yes, please leave your contribution with the person completing your application and specify it is for All Paws Rescue or you can contact All Paws Rescue Group on Facebook to inquire about drop off donations or to arrange a pickup of your donation)

Falsified information and previous history or suspected history of animal abuse will lead to automatic rejection of the application. The adoption of an animal is not an impulsive decision and not to be taken lightly. Please ensure you are capable for a lifelong loving relationship with your potential animal.

Your adoption application above will be reviewed by an All Paws Rescue representative after which we will be in contact with you.

If your application is approved you must complete the attached Adoption Agreement

By signing below, I give All Paws Rescue Services and 24PetWatch permission to contact me via email.

Applicant Signature: _____ Date: _____

Approved by: _____ Date: _____

All Paws Rescue Services is a Registered Non-Profit Organization

Visit us at: www.AllPawsRescue.ca