HSAC Dog Adoption Application

In an effort to assure the best possible pet adoption, we ask that you complete this application. An unwise adoption can result in an unpleasant experience for the pet and adoptive family and can make placing a returned animal into another home more difficult. We reserve the right to refuse any adoption that we feel is not in the best interest of this animal. Although we do not restrict any specific breed from being adopted, we do limit certain breeds being placed in certain cities and areas due to the high rate of dog theft and/or abuse.

A refusal does not represent any shortcoming of the applicant, but reflects our assessment that a particular pet would possibly not do well in the circumstances offered. We feel that our years of experience should be our chief guide in arranging a successful adoption. It is our intention to make the best possible placement for this animal. We are committed to treating everyone as an individual and with respect during this screening process.

make sure you and your fa we try to pre-screen medica	idered donations and are non mily are ready for the expens and temperament issues befor by to help in any way should this	se, work, and commit re placing an animal for	ment needed to r adoption, some	ensure a successful adoption behaviors or conditions can go	n. While
Last Name:		First Name: _			
Address: City:					
State: Z	ip Code:	ID Verified:	Yes No	Staff:	_
Home Phone:	Cell:	E-	Mail:		_
Occupation:		Employer:			
Length at Job:	Employer's P	hone:			
Number of children in t	he home or that visit:	Ages:			
Names of all adults (ov	er 18 years old) in househ	nold:			
Number of dogs in the	home or that visit:	Cats:	Other pe	ets:	
If you have another do	g, have they met this dog?	Yes No			
·	t pet's vaccination or othe				
Do you: Own your hor	ne Rent Live with re	latives/friends O	ther		-
Landlord's Name:		Ph	none:		
Housing verified: Online	Tax Bill Lease Phone Oth	er:		Staff:	
When you are not hom	e, where will this dog be k	ept?			
On average, how many	hours a day will this dog	spend alone?		_ Outside?	
When your dog is outsi	de, they will be:				
Chained Penned/Ke	nneled Leash-walked	Running Free	Fenced Yard	Invisible Fence	
What activities do you	ike to do with your dog?				
Do you like a dog that i	s: Hyperactive Very Activ	ve Moderately Acti	ive Less Acti	ive Couch Potato	
Do all of the adults in y	our household agree abou	ut adopting this do	g? Yes N	lo	
What is the primary rea	son for choosing to adopt	a dog today?			
Family Companion Gi	ft for family/friend Protection	on/Guard Compar	ny for other pet	Other:	_

Do you have any behavior	al questions about this d	og?							
Do you have any medical	questions about this dog	?							
Routine veterinary care can easily cost at minimum \$200 a year for routine vaccines, deworming, and heartworm testing, without considering possible emergencies or unforeseen illnesses. Adopting a dog is a long-term financial commitment.									
Are you financially ready	and able to provide ve	eterinary care for this do	og? Yes No						
This dog must be kept on heartworm prevention year-round, which can cost between \$60 and \$100 annually and re-tested for heartworm disease every year. Heartworm disease is spread by mosquitoes and can be fatal, but is easily prevented with a monthly chewable tablet. We can fill this medication for you today or you can have it filled at your regular veterinarian.									
Would you like to purchase your yearly supply of heartworm prevention today? Yes No									
Preventing fleas and ticks is easier and more cost-effective than dealing with the consequences of an infestation, which can range from skin infections for your pet to the need for an exterminator for your home. We have several products which are recommended by our veterinarians. These products should be used year-round due to our local weather conditions.									
Would you like to purchase a supply of flea and tick preventative today? Yes No									
A good-quality dog food is an essential part of your pet's health. Food of a poor quality can lead to health problems such as skin and ear infections or obesity. We offer several types of high-quality pet food for purchase, including the variety this dog has been eating during its time here, Nutro Max.									
Would you like to purchase a bag of dog food today? Yes No									
Would you like to have an ID tag engraved for \$5 while you wait? Yes No									
You will receive a complementary visit with one of our Veterinary Services doctors within 30 days of your dog's adoption. Some young animals may need booster vaccines, de-wormers, or testing. These can be scheduled by calling our Veterinary Services department or with your adoption counselor today. Fees will apply for boosters and can be quoted by your adoption counselor. If your dog was too young to receive a Rabies vaccine at the time of adoption, this vaccine will be complementary at your adoption vet visit. Any medical issues or questions can be handled through our full-service veterinary facility. HSAC will not be responsible for any money paid to any other facility for any reason. Adoptions are non-transferable without written consent of the Humane Society of Atlantic County's Executive Director.									
I acknowledge that all dogs are adopted with the understanding they will live indoors and will not be chained or tied outdoors at any time. I have read and understand all the information and questions on both sides of this form. If I, my family, or other parties consent to having our photo taken today, I give consent from all parties for this photo to be used on the Humane Society of Atlantic County's Facebook page, website, and in other publications, and I understand I will receive no compensation. I have answered all questions honestly and thoroughly and addressed all concerns about this dog with my adoption counselor today.									
Signed:	Pr	int Name:	[Date:					
Adoption Fee	\$								
Heartworm Prevention	\$	6 month	12 month	Declined					
Flea/Tick Prevention	\$	Single Dose	3 pack/4 pack	Declined					
Misc. Supplies	\$								
Total Amount Collected	\$	Type of Payment	HSAC File #	Staff					
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