



Dog Adoption Application

Welcome to Humane Society of Monroe County (HSMC) adoption program. We request the following information so that we can assist you in the selection of a new dog that will fit your home and lifestyle as a lifetime companion. This form and a consultation with a HSMC representative are designed to help you find the dog most compatible with your lifestyle.

The animals available for adoption here are from a variety of sources. All animals are examined upon entry, and their health is monitored while with us, but there is always a chance that an animal is incubating a disease without showing any clinical signs.

To be considered as an adopter, you must:

- Be 21 years of age or older
- Have identification showing your present address
- Have the knowledge and consent of your landlord
- Be able and willing to spend the time and money necessary to provide medical treatment and proper care of the dog.

HSMC reserves the right to refuse adoption to anyone. No animal(s) will be adopted to prospective owners who mislead or fail to provide accurate information on this Application.

Name of Applicants _____ E-MAIL _____

List all names of anyone in the household over the age of 18.

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Work or Cell Phone _____

How did you hear about this pet? _____

Describe in detail the dog you're looking for: _____

If you are interested in a specific dog/puppy please give us there name? _____

Will this be your first dog? Yes No

If not, what pets do you currently have in your household?

Name	Type	Spayed/Neutered	Kept Where	Age
_____	<input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	_____
_____	<input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	_____
_____	<input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	_____
_____	<input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	_____

Are they current on vaccinations? Yes No Don't Know

Have they been tested for Heartworms? Yes No Don't Know

Are they currently on Heartworm prevention? Yes No Don't Know

What happened to the pets you no longer have? _____

Have you ever turned an animal into a shelter? Yes No If yes, please explain: _____

Have you ever had a pet euthanized? Yes No If yes, please explain: _____

If you have pets, will they(or it) adjust to a new pet entering the household? Yes No Don't Know

Was your last dog obedience trained? Yes No

Why do you want this dog? Companion Companion for other pet House pet Watch Dog Gift

Other (explain) _____

How many adults are in your family? _____

How many children? _____ Children's ages? _____

Does any member of your household have an allergy to dogs? Yes No Don't Know

How many hours per day will the dog be without human companionship? 0-3 3-6 6-9 9-12 more than 12

Where do you live? House Apartment Condo Mobile home Other _____

Do you own or rent your home? Own Rent If you rent, does your lease allow pets? Yes No

If you rent, what is your landlord's name? _____ Phone _____

Where will you keep the dog? In the house Outdoors Both indoors and outdoors Other (explain)

Do you have a dog door? Yes No

Do you have a completed fenced yard? Yes No What kind of fence? _____ Height _____

Is there a gate? Yes No If no explain _____

Are there times when your dog will be tied up? Yes No If yes, when _____

Will the dog spend any time in the garage? Yes No If yes, explain _____

If your new puppy/dog is not housebroken, what method will you use to train it? _____

How much time would you have on a daily basis to exercise your dog? _____ Method _____

Where will this dog be kept during the day? _____ During the night? _____

Will you keep the dog up-to-date on vaccinations? Yes No

Who is your Veterinarian? _____ Phone _____

If you move, will you take the dog with you? Yes No

Have you ever applied to HSMC before to adopt an animal? Yes No

If yes, when? _____

Are you willing to have a representative of HSMC come to see where the dog will be living? Yes No If no, explain

Are you willing to take responsibility for this dog for the next 10 to 20 years? Yes No If no, explain

Additional Comments from applicant: _____

Signature

Date

Thank you for providing this information. Your application along with others for this pet will be reviewed and this pet will be placed in what HSMC feels, is the best possible home.

Humane Society of Monroe County * P.O. Box 164 * Waterloo, IL 62236 * 618-282-PETS * www.hsomfcil.org

HSMC Checks Landlord Check _____ Vet Check _____ Home Visit _____