



Dog Adoption Application

Completion of application does not guarantee approval

Name of applicant: _____ Occupation: _____

Address: _____ Zip: _____ Phone: _____

Email: _____

Are you 19 years of age or older? _____

Do you live in a: House _____ Apartment _____ Condo _____ Town House _____ Other _____

Do you: Own _____ Rent _____ or live with someone who does own? _____

Landlord's name and phone number: _____

Have you talked with roommates/landlord/parents about adopting? _____

Are there any kids in the household? _____ If yes, what ages? _____

Does anyone in the household have pet allergies? _____ If yes, how will they be handled? _____

What is the noise/activity level in your household? _____

Are you a first time dog/puppy owner? _____

Why do you want a dog? (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> House pet | <input type="checkbox"/> Companion for family | <input type="checkbox"/> Companion for another pet |
| <input type="checkbox"/> Companion for children | <input type="checkbox"/> Protection for home/family | <input type="checkbox"/> Watchdog |
| <input type="checkbox"/> As a gift | <input type="checkbox"/> Other (specify) _____ | |

Have you ever given up an animal to someone else or another shelter? _____ If yes, explain: _____

Other pet (specify number of each): Dogs _____ Cats _____ Other _____

If you have dogs or cats, are they spayed/neutered? Yes _____ No _____

What pets have you had in the past? _____

What happened to the ones you no longer have? _____

Do you have a way to keep the animals separate if they do not immediately get along? _____

If you move are you committed to finding a place that will allow you to keep your dog? Yes _____ No _____

Where would the dog go when you go for vacation? _____

Name and number of current veterinarian: _____

How would you train this dog? (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Obedience Classes | <input type="checkbox"/> Hit with newspaper | <input type="checkbox"/> Choke collar |
| <input type="checkbox"/> Firm verbal commands | <input type="checkbox"/> Clicker/hand signals | <input type="checkbox"/> Positive Reinforcement |
| <input type="checkbox"/> Other (specify) _____ | | |

Dogs who are not allowed to get enough exercise are more prone to having behavioral problems (chewing up things, too much energy, barking, and even some aggression). How and how often do you plan to exercise your dog? _____

Will you be committed to potty train if needed? Yes ___ No ___

Pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, proper shelter, and exercise for your new pet? Yes ___ No ___

Are you able to make a long term commitment to care for this dog for its entire life span (\$500-\$1,000/year for 12-20 years)? Yes ___ No ___

How will you pay for any medical emergencies your pet is likely to experience at some point during its life?

Will you be able to live with hair on your furniture, stains on your rugs, a warm body in your bed, and an animal that might be destructive at times? Yes ___ No ___

How much time will the dog spend: Inside ___% Outside ___%

How long will the dog be left alone without humans? _____

Where will the dog be when left alone (crate, inside, outside)? _____

Have you dog-proofed this area to prevent escape? Yes ___ No ___

Do you have a fenced in yard? Yes ___ No ___ If yes, how tall is the fence? _____

Where will the dog sleep at night? _____

If something happened to you, who would care for the dog? _____

Under what circumstances would you not be able to keep this dog? _____

Have you adopted a shelter animal before? ___ Where are they now? _____

By signing this adoption application I understand:

For the safety of your pet, all dogs are required to leave with a collar and a leash. We have some for sale from \$6-\$12, or you may bring one with you at the time of adoption. All proceeds from this purchase benefit shelter animals.

LCHS cannot guarantee the health or temperament of any animal. We encourage adopters to contact us with questions to find quick and effective advice for everyday problems. If an adopter is no longer able to keep an animal for any reason we require that the animal be returned to LCHS.

The adopter agrees that all information on this application is accurate. LCHS has the right to contact your landlord, rental company, and/or veterinarian.

_____(initial) THE HOLD FEE IS NON REFUNDABLE. IF YOU DECIDE NOT TO PROCEED WITH THE ADOPTION, YOU WILL NOT RECEIVE A REIMBERSEMENT FOR ANY FEES PAID, INCLUDING THE HOLD FEE.

Applicant Signature: _____ Date: ___/___/___

LCHS Representative: _____ Date: ___/___/___