



Terrell County

# Humane Society of Terrell County Cat/Kitten Adoption Application

Which pet(s) are you interested in?

## Applicant

Name: <input type="checkbox"/>	
Age: <input type="checkbox"/>	Occupation : <input type="checkbox"/>
Place of Employment: <input type="checkbox"/>	

Home Address: <input type="checkbox"/>	City, State & Zip: <input type="checkbox"/>
Home Phone: <input type="checkbox"/>	Alt Phone: <input type="checkbox"/>
Email Address: <input type="checkbox"/>	

## Co-Applicant:

Name: <input type="checkbox"/>	
Age: <input type="checkbox"/>	Occupation : <input type="checkbox"/>
Place of Employment: <input type="checkbox"/>	

Which type of housing do you live in?

House Apartment Condo/Townhouse  Mobile Home

Do you...

Own your home Rent your home Live with parents

If you rent do you have your landlord's permission to own a dog? Yes No

Apartment complex and/or Landlord's name and phone number:

Do you have a fully fenced yard? Yes No

If so, what type of material is the fence and how high is it?

If no, how will the dog be secured when outside?

Run free Leash Pen Chain Runner Tie\_Out

Other:

How many times have you moved in the past 5 years?

If you move, will your pet(s) go with you? Yes  No

Would you consider moving somewhere that doesn't allow pets? Yes  No

Please list the name, age, and relationship to applicant of any other members of your household.

NAME	AGE	RELATIONSHIP

Does anyone in your household smoke?  Yes  No

Have allergies?  Yes  No

Will this dog be a surprise for anyone living in your house?

Yes  No ; If YES, then who? \_\_\_\_\_

What activity level best describes your home?

Busy- visits by friends, meetings, parties, children

Moderate - normal comings and goings

Quiet - "homebodies", few guests

**Current and Past Pets:**

How many pets do you currently have?

Cats: \_\_\_\_\_ Dogs: \_\_\_\_\_ Other (please specify) : \_\_\_\_\_

Please list each pet's name, age, and breed:

Pet Name	Age	Breed

Are your current pets spayed or neutered?  Yes  No

If not, please explain: \_\_\_\_\_

Are your pets on heartworm prevention?  Yes  No; Flea prevention?  Yes  No

Besides those listed above, how many other pets have you had in the last five years?

Cats: \_\_\_\_\_ Dogs: \_\_\_\_\_ Other (please specify) : \_\_\_\_\_

Please list each pet's name, breed, and what happened to each of them (put to sleep or died (please give reason as run over, given away, sold, ran away, etc.):

Pet Name	Age	Breed	What Happened

Have any of your current or past pets ever had a serious illness, injury, or behavior problem?  Yes  No.

If YES then please describe:

_____
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Have you ever surrendered a pet to a shelter or rescue group?

Yes  No.

If YES then please explain the circumstances?  
[Redacted]

Have you ever adopted a pet from a shelter or rescue group?  Yes  No

If so, which shelter or group and when? [Redacted]

Please check any of the following reasons for adopting this pet:

Family Pet  Child's Pet  Watchdog  Companion  Companion for other pet  
 Hunting dog  Gift  Other - please specify: [Redacted]

List any general questions you would like to ask about this particular dog:  
1. [Redacted]  
2. [Redacted]  
3. [Redacted]

Who will be responsible for the daily care and training of this pet? [Redacted]

Where will this pet live?  Outside only  Inside only  Inside/Outside

What procedures will you use for housetraining? Check all that apply:

Crate training  Paper training  Rubbing nose  Outside only  
 Swatting with newspaper  Other: [Redacted]

How many hours will you dog be alone on a typical day? [Redacted]

Where will your pet stay when you are not at home?

Outside in a pen  Outside on chain  Tie-out  Outside in fenced yard  
 In garage  Inside in crate  Inside free run of house  Inside one room of house  
 Other: [Redacted]

How do you plan to prevent fleas and ticks on this pet? [Redacted]

How do you plan to prevent heartworm disease for this pet? [Redacted]

What type of identification do you plan to use for this pet?

ID tag  Microchip  Tattoo  None

If you are unable to keep this dog for any reason, will you return the dog to HSTC?

Yes  No

What is the name and phone number of your veterinarian or vet clinic?

Veterinarian or Vet clinic	Phone Number
[Redacted]	[Redacted]
[Redacted]	[Redacted]

What do you expect pet care (vet care, vaccines, food, toys, etc.) to cost yearly?

\$ [redacted]

A dog can live well over 10 years and requires a major commitment of time, finances, and emotion. Why do you feel you can make that kind of commitment at this time?  
[redacted]

**References:**

Please list the name, phone number, and occupation of two personal references. Please do not include relatives.

Reference Name	Phone Number	Occupation
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

How did you hear about the Humane Society of Terrell County?

- HSTC website
- PetFinder.com
- Radio
- Newspaper
- Word of mouth
- At an adoption event or fundraiser
- Other: [redacted]

*I have read the above information carefully and have filled out this application honestly and in its entirety. Falsification of any of the above information will be grounds for disallowing the adoption of the pet and possible removal of said pet from my home. Applicant must be 18 years of age or older. HSTC reserves the right to refuse any applicant. I give HSTC permission to investigate to the fullest extent of their legal capability, the information written above as well as conduct inquiries with landlords, veterinarians, and related officials. In addition, I understand that the decision of which animals are adopted to specific homes is dependent upon many varying factors, including but not limited to, the compatibility of home and family to the individual animal(s), and the amount of eligible applications received on this animal. I realize that it is HSTC's prerogative to place the animal in the home HSTC feels is most appropriate and that HSTC's decision is final.*

Checking this box designates my digital signature. When the Adoption is complete my normal signature will be placed below.

Digital Signature: [redacted]  
Date: [redacted]

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_