



<b>OFFICE USE:</b>
Kennel Tech _____
Landlord Check _____
Adoption Counselor _____
Driver's License # _____

Date of application \_\_\_\_\_

Animal you wish to adopt \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Are you Head of this household?  Yes  No, explain: \_\_\_\_\_

Place of employment \_\_\_\_\_ Hours worked per week \_\_\_\_\_

Pet's new home is a  House  Apartment  Condo  Mobile Home  Other \_\_\_\_\_

This property is:  Owned  Rented *If rented please complete below*

*Pet allowance, weight and/or breed restrictions will need to be verified by adoption counselor.*

Landlord/Rental agency name: \_\_\_\_\_ Phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Condominium Name: \_\_\_\_\_

Number of adults living in pet's new home: \_\_\_\_\_ Number of minors \_\_\_\_\_

Does anyone in the household have an allergy to dogs/cats?  No  Yes \_\_\_\_\_

How many hours/day will this pet be alone without human companionship/supervision? \_\_\_\_\_

In general, where will this new pet be during the day? \_\_\_\_\_ At night? \_\_\_\_\_

**If a cat:** Is it your intention to have this cat declawed?  Yes  No

Will you be keeping this cat indoors at all times?  Yes  No, explain \_\_\_\_\_

**If a dog,** would you be willing to enroll in obedience classes?  Yes  No

When outdoors: *(check all that apply)*  On a leash  Allowed to run loose  Chained  
 Fenced yard Type of fence \_\_\_\_\_ Height of fence \_\_\_\_\_

What type of outdoor shelter will be provided? \_\_\_\_\_

Are any other animals at the property where the pet will live?  Yes  No *If yes, complete below*

Name of Animal	Type of Animal	Sex	Age	Time Owned	Spayed/ Neutered?

1. How many pets, other than those listed above, have you owned in the past 5 years? \_\_\_\_\_

2. What happened to them? \_\_\_\_\_

3. Will you allow a representative from the AWL to visit your home?  Yes  No

4. Where did you hear about AWL? \_\_\_\_\_

5. **Adopter Agreement** by signing below, I certify that the information I have given is true and that any misrepresentation of facts may result in my losing the privilege of adopting a companion animal from the AWL. I understand that all adoptions fees are non-refundable.

\_\_\_\_\_  
Signature of Adopter

\_\_\_\_\_  
Date