

# Freetown Sanctuary

## Adoption Application and Contract

Name of pet(s) you are interested in adopting: \_\_\_\_\_

### Personal Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Mobile Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_ Years \_\_\_\_\_ Months

How long have you been employed at your current workplace? \_\_\_\_\_

Do you rent or own? \_\_\_\_\_ Rent \_\_\_\_\_ Own

If you rent, provide Landlord name, address and phone: \_\_\_\_\_  
\_\_\_\_\_

Do you have permission from your landlord to get a dog? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you aware of pet deposit and monthly fees (if any) required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have a fenced yard? \_\_\_\_\_ Yes \_\_\_\_\_ No

Type of Fence and height \_\_\_\_\_

If you do not have a fence are you prepared to walk your dog multiple times daily in spite of weather conditions (cold, hot, rain, snow, etc.)? \_\_\_\_\_ Yes \_\_\_\_\_ No

What is your family's lifestyle like? \_\_\_\_\_ Active and on the go \_\_\_\_\_ Quiet and relaxed

\_\_\_\_\_ Entertain frequently \_\_\_\_\_ Lots of kids in and out \_\_\_\_\_ Travel frequently

Do you have children? \_\_\_\_\_ Yes \_\_\_\_\_ No

List the names and ages of every person living in your home:

Name	Age

Why did you decide to get a dog? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are you looking for in a pet? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Who will be responsible for taking care of the dog? \_\_\_\_\_

\_\_\_\_\_

What type of research have you done to prepare yourself for being a responsible pet owner?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will you deal with behavioral issues that may come up such as separation anxiety or chewing up your belongings?

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How many hours per day will the dog be alone? \_\_\_\_\_

Where will the dog stay when no one is at home? \_\_\_\_\_

When you are home? \_\_\_\_\_

At night? \_\_\_\_\_

How and how often will you exercise your dog? \_\_\_\_\_

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Who will care for your dog when you are out of town (vacation, etc.)? \_\_\_\_\_

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Under what condition(s) would you give up your dog? \_\_\_\_\_

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### Current and Previous Pet Information

Please provide the following information about your current pets:

Name	Breed	Age	Spayed/Neutered
			_____ Yes _____ No
			_____ Yes _____ No
			_____ Yes _____ No
			_____ Yes _____ No
			_____ Yes _____ No

If applicable, please provide the following information about any pets you have had in the last 5 years that are no longer with you:

Pet Name and Type	Reason Pet Is No Longer With You

Current Vet Name: \_\_\_\_\_

Practice Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_