

ALBANY HUMANE SOCIETY
Preliminary Adoption Form

This questionnaire must be completed by anyone interested in adopting a pet from the Albany Humane Society. We at the Albany Humane Society are trying to place our animals in permanent, responsible homes, while at the same time, match you with a pet which is suitable for you and your lifestyle. **NOTE: Providing false information anywhere on this form will result in the forfeiture of all adoption fees and any animal(s) adopted.**

Please Print

M _____ First Name: _____ MI: _____ Last Name: _____ Date: _____

Your Current Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

1. How long have you lived at the above address? _____
2. What type of pet are you looking for? Dog: _____ Cat: _____ Puppy: _____ Kitten: _____ Other: _____
3. Please check any of the following reasons you want to adopt a pet: Family Pet: _____ Child's Pet: _____ Watchdog: _____
Breeding: _____ Companion: _____ Hunting Dog: _____ Guard Dog for Business: _____ Barn Cat/Mouser: _____
Companion for another pet: _____ Other (Explain): _____
4. What is your source of income? _____
5. Are you 18 years of age or over? Yes: _____ No: _____ Do you live with a relative? Yes: _____ No: _____
6. Are you interested in adopting for Yourself _____; Family _____; Someone Else _____?
7. Do you live in a: House: _____ Apartment: _____ Condo: _____ Mobile Home: _____ Duplex: _____ Townhouse _____
8. Do you Own your home : _____? Rent: _____? If you rent, does your lease allow pets? Yes: _____ No: _____
9. What is your landlord's name or the name of your apartment/condo complex? _____
_____ Phone Number? _____
10. How many people live in your household? _____ Do all members know that you plan to adopt a pet? Yes: _____ No: _____
11. What are the ages of any/all children in your household? _____
12. Does any member of your household have allergies? Yes: _____ No: _____ What type? _____
13. Will an adult be home during the day? Yes: _____ No: _____ Part Time (how much): _____
14. Who will be responsible for taking care of your pet? _____
15. If adopting a dog or puppy, what procedures will you use for housebreaking? _____

(PLEASE COMPLETE BOTH THE FRONT AND BACK OF THIS FORM)

16. If adopting a dog or puppy, how will you handle chewing or destructive behavior? _____
17. If adopting a cat or kitten, how will you handle scratching or destructive behavior? _____
18. Have you ever adopted a pet from the Albany Humane Society? Yes: _____ No: _____, or from another shelter? Yes: _____ No: _____
Where is that pet now? _____
19. How many pets have you owned in the past five years? Dogs: _____ Cats: _____ Where are those pets now (be specific)? _____

20. Have you ever turned in an animal to the Albany Humane Society or to another shelter? Yes: _____ No: _____
When: _____ Why: _____
21. Has a dog died on your premises of distemper, parvo, or unknown causes within the last six (6) months? Yes: _____ No: _____
22. Has a cat died on your premises of distemper, leukemia or unknown causes within the last six (6) months? Yes: _____ No: _____
23. Do you or anyone in your household own pets? Yes: _____ No: _____ What type/kind? Dog: _____ Cat: _____ Please list each animals' name, age, sex, and breed: _____

24. Do the pets in your household live indoors or outdoors? _____
25. Are the pets in your household up to date on all their shots? Yes: _____ No: _____ If no, explain: _____
26. Are the pets in your household spayed or neutered? Yes: _____ No: _____ If no, explain: _____
27. What is the name of your Veterinarian or Veterinary Clinic? _____
28. Would you object to having your new pet spayed or neutered? Yes: _____ No: _____ If yes, why? _____
29. Are you willing to go to the expense and trouble of taking your new pet to a veterinarian for full preventative and medical care **AT LEAST** once a year? Yes: _____ No: _____
30. Will your new pet live inside _____ or outside _____? Where will your pet sleep? _____
31. Is there a yard available at your residence Yes: _____ No: _____ If the yard completely fenced? Yes: _____ No: _____
Is there a dog house? Yes: _____ No: _____ Will your new pet ever be tied or chained? Yes: _____ No: _____
32. What do you plan to do with your pet when you go on vacation or travel? _____
33. If you have to move, what would you do with the animal? _____
34. What if your new residence didn't allow pets? _____
35. Would you object to an authorized representative of the Albany Humane Society inspecting the animal and premises where the animal is being kept? Yes: _____ No: _____

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Information checked by: _____ Approved: _____ Declined: _____ Reason for refusal (be specific): _____
