



Application for Dog Adoption/Foster

STAFF INITIALS _____

Approved _____

Animal Information				
<input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPT	Dog Name:	Date:		
Where did you hear about this animal?				
Applicant Information				
Name:				
Email Address:				
Are you 21 or older? <input type="checkbox"/> YES <input type="checkbox"/> NO	Phone:	Drivers License #:		
Mailing/Physical address:				
City:	State:	ZIP Code:		
Occupation:				
Emergency Contact:			Phone:	
Household Information				
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	Does your lease allow pets? <input type="checkbox"/> YES <input type="checkbox"/> NO	Landlord name:	Phone:	
Home type: <input type="checkbox"/> HOUSE <input type="checkbox"/> APARTMENT <input type="checkbox"/> MOBILE HOME <input type="checkbox"/> DUPLEX <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> OTHER:				
Do you have a completely fenced yard? <input type="checkbox"/> YES <input type="checkbox"/> NO	Fence Height:	Fence Size: _____ x _____		
Fence type: <input type="checkbox"/> CHAINLINK <input type="checkbox"/> WOOD <input type="checkbox"/> OTHER:			Is there shelter? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If there is no yard, please describe how you plan to exercise your dog and how often:				
How many people live in your household?		Ages of children living or visiting the home under 18:		
Is everyone in your household in favor of adopting this pet? <input type="checkbox"/> YES <input type="checkbox"/> NO Is anyone in your household allergic to dogs? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Current Pets				
<input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> OTHER:	Breed:	Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female	FIXED? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> OTHER:	Breed:	Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female	FIXED? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> OTHER:	Breed:	Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female	FIXED? <input type="checkbox"/> YES <input type="checkbox"/> NO
Are ALL pets currently in your home up to date on vaccinations and licensed in the county you reside in? <input type="checkbox"/> YES <input type="checkbox"/> NO				
History				
Have you ever adopted an animal from Oregon Coast Humane Society? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Have you ever relinquished an animal to this or any shelter? <input type="checkbox"/> YES <input type="checkbox"/> NO				
What is the name of your regular veterinarian?				Phone:
City:	State:	ZIP Code:		

2840 Rhododendron Drive, Florence, OR 97439
Phone: 541-997-4277

501c3 Tax ID:93-1079548

Do we have your permission to contact your regular veterinarian as a reference? YES NO

Lifestyle Information

Why are you adopting a dog? Check all that apply: COMPANION FOR SELF COMPANION FOR PET COMPANION FOR CHILD
 GUARD DOG HUNTING DOG OTHER:

On a normal day, how many hours will your dog be alone?

Where will they be during this time?

Where will your pet sleep?

Will your dog primarily be an indoor or outdoor pet? INDOOR OUTDOOR

Approximately how many hours will your pet be outside?

What is the activity level in your home? LOW MEDIUM HIGH

Describe your training plan for this dog:

Under what circumstances would you return a pet to the shelter?

How much do you think it will cost each month to provide the necessary medical care, dietary needs, and overall welfare for this dog?

Review

If the shelter deems it necessary, do you agree to participate in a home visit prior to adoption? YES NO

Have you reviewed the Oregon Coast Humane Society adoption policies? YES NO

Do you verify that you have reviewed the information provided on this form and that it is correct? YES NO

Do you want/need additional information on how to train your dog? YES NO

Oregon Coast Humane Society wishes to place each of our pets into permanent, caring, and responsible homes. Your completion of this form does not guarantee that your application will be approved. Pets are always placed in homes that are compatible with their needs and personalities.

Do you understand and agree that Oregon Coast Humane Society has the right to deny any application, for any reason, regardless of your relationship with the shelter? YES NO

Signature

Date: