

MORRISTOWN HAMBLEN HUMANE SOCIETY

ADOPTION APPLICATION

DATE AND TIME OF APPLICATION \_\_\_\_\_

Name of Animal \_\_\_\_\_ ID # \_\_\_\_\_

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

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Cell \_\_\_\_\_

Please circle the type of animal you are interested in adopting: Dog Puppy Cat Kitten

Have you ever SURRENDERED a pet to a shelter or rescue? \_\_\_\_\_

Name of Veterinarian \_\_\_\_\_ Phone # of Vet \_\_\_\_\_

Do you live in ... Apt Condo Single/Doublewide House Do you own or rent? \_\_\_\_\_

IF YOU RENT, WE MUST HAVE NAME AND PHONE NUMBER OF LANDLORD

\_\_\_\_\_

List all the animals currently in the household or on property (even if not owned by you)

Type of animal	Age	Sex	Spayed/Neutered
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please use back of sheet for additional animals.

Why do you want this animal? Companionship Protection Breeding Show Other

Do you plan on keeping the animal inside or outside \_\_\_\_\_

Are your animals up to date on their vaccines? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you aware of the necessity of vaccines and heartworm preventatives for cats and dogs? \_\_\_\_\_

Are you aware of state/local ordinances (leash laws, rabies vaccinations, shelter, food, water)? \_\_\_\_\_

How did you find out about the pet you want to adopt? \_\_\_\_\_

I acknowledge that all the information of this form is true and correct.

(If any information is found to be false, MHHS will not adopt any animal to you now or in the future. If the animal has already been adopted, MHHS reserves the right to have Animal Control come to your home and remove the animal)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adoption Counselor's Signature \_\_\_\_\_ Date: \_\_\_\_\_