

Email: _____ **Date:** _____

Pet's Name: _____ **Description:** _____ **PD:** _____ **Check** _____ **Cash** _____

Microchip#: _____ **Rabies Tag#:** _____ **BHV** _____ **BV** _____

St. Francis Animal Shelter
PO Box 221-Buffalo, WY 82834 – 307-684-1738

Dogs- St. Francis Animal Shelter Adoption Application

Welcome to St. Francis Animal Shelter. We're glad you've come to adopt a new dog from our facility. The following information is requested so that the Adoption Committee can assist you in the selection of your pet. The consultation process is designed to help us determine if the adoption is in the dog's best interest and to assist you in finding a dog that is compatible with your lifestyle.

Our primary concern is the welfare of the animals in our care. We do not want people adopting animals from us to be unsatisfied with the pet they choose, so we attempt to place the right pet in the right home. We may refuse an adoption for your sake as much as for the pet's, if we feel it will not work.

In Order To Be Considered As An Adopter, You Must:

- Be 18 years of age or older.
- Have identification showing your current address.
- Have the knowledge and verified consent of your landlord.
- **Be able and willing to spend the time and money necessary to provide training, medical treatment, and proper care of the pet.**

Name: _____ Home Phone: _____ Work Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

1. Is this your first experience with a dog? **Yes** **No**
2. Please check any of the following reasons for adopting a dog: Watchdog _____ Companion _____ Breeding _____ Hunting _____
Family Pet _____ Guard dog for business _____ Child's Pet _____ Companion for other Pet _____ Other:(Specify) _____

3. Do you own any other pets at the present time? **Yes** **No**
If yes, Please list information:
- | Name | Breed/Species | Age | Sex | Spay/Neutered |
|-------|---------------|-------|-------|---------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

4. How many dogs have you owned in the past 10 years? _____
List breed/age/were they spayed or neutered?

5. Do you still have these dogs??? **Yes** **No** If not, what happened to them. Be specific.

6. Do you have a regular veterinarian?? (If not, list whom you plan to use)
Name: _____ Phone: _____
Address: _____

7. Do you live in a House _____ Apartment _____ Mobile Home _____ Duplex _____

8. Do you own or rent? _____
If you rent, does your lease allow for pets? **Yes** **No**
Landlord's name: _____ Phone#: _____

9. How long have you lived at this address? _____
10. How many people live in your house? _____ Adults _____ Children (Ages) _____
11. Do all the adults in your household know that you plan to adopt a dog? **Yes No**
12. Are there regular visitors to your home (human or animal) with which your new pet must get along? _____
13. Do you have a fenced yard?? **Yes No** Fence type and height _____
Does fencing completely enclose a yard for the dog?? **Yes No** If no fence, how do you handle the dog's exercise and toilet duties? _____
14. Do you have a crate? **Yes No**
15. Why did you choose this dog?? _____
16. Where will the dog spend the day? Check all that apply. Loose indoors _____ Loose outdoors _____ Crate _____ Fenced yard _____
Kennel/dog run _____ Tied up outdoors _____ Bring to work _____ Garage _____ Doggie door _____ Other (specify) _____
17. How many hours on the average will the dog spend alone? _____
18. Where will the dog spend the night? _____
19. References:
- | Name | Address | Phone |
|-------|---------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

All of the above information I have given is true and complete. Should an intact male or female dog be placed with me , I agree to have it altered by the date indicated on the adoption agreement. This dog resides in my home as a pet. I will provide it adequate food, water, shelter, attention, training, and medical care. I understand that St. Francis Animal Shelter and its representatives are not responsible for the accuracy of information received about the temperament, physical condition, or habits of the animals available for adoption. I understand that it is my responsibility to see and evaluate the pet for myself before agreeing to adopt the animal. I am in full agreement with these terms of adoption. The St. Francis Animal Shelter and Board of Directors therefore are in no way responsible for any damage, accident, or injury resulting from the placement of this dog into my household.

Applicant Signature: _____ Date: _____

Decision made per interview: Approved _____ Denied _____

Comments: _____

Dog _____ Neutered _____ Spayed _____

If your new dog has not been spayed or neutered, you may make an appointment with the Buffalo Vet or Big Horn Vet, at the appropriate age, and St. Francis Animal Shelter will pay for this procedure when you present this form signed by an authorized member.

Dog's name _____ Description _____

Adopter's name _____ Address _____

Phone#: _____ Amount Donated _____ check _____ cash _____

St. Francis by _____ Date _____

Print name _____