



Adoption/Foster Application

Date:	Animal(s) you wish to adopt or foster:	Dog Cat (Circle One)
Name:	Address:	
City:	State:	Zip:
County:	Cell Phone:	Home Phone:
Email:	Occupation:	Age:

How long have you lived at your present address? _____

Do you:

- Own
- Rent Landlord's Name/Phone #: _____
- Live in someone else's house Relationship: _____

Please list all of the people living in your household with their age and relationship to you: _____

List all animals who have lived in your home in the past three years or more:

Name	Dog/Cat	Sex	Age	Breed	Spayed or Neutered?	Still with you; if not, why?	Shots up-to-date?

Current Veterinarian's Name: _____ Phone #: _____

What **person** is the animal(s) listed under?

Please indicate if you have questions about the following:

- | | | |
|---|---|--|
| <input type="checkbox"/> Pet Allergies | <input type="checkbox"/> Spay/Neuter resources for other pets | <input type="checkbox"/> Alternatives to declawing |
| <input type="checkbox"/> Crate Training | <input type="checkbox"/> Introducing new pets to current pets | <input type="checkbox"/> Litterbox training |
| <input type="checkbox"/> Housebreaking | <input type="checkbox"/> Introducing pets to children | <input type="checkbox"/> Dog or Cat behavior |
| <input type="checkbox"/> Other: _____ | | |

What will you do if you are no longer able to care for the animal for any reason?

Describe your typical schedule outside of the home and how long the animal will be left alone each day:

Cat adopters:
Where will this cat be kept?
 Inside Outside

Dog adopters:
Where will this dog be kept?
 Inside Walks
 Outside Fenced yard
 Park
How will this dog be exercised?
Is your yard fenced? If yes, what is the height?
 Yes, height: _____
 No

How much time are you willing to spend helping an animal adjust to your home?

Are you committed to caring for any future medical needs of this animal, including regular check-ups and vaccinations?
 Yes No

Have you adopted from Animal Protectors of Allegheny Valley previously?
 Yes No

Animal Protectors will always put the needs of the animals first, and seeks to find the best home for each of our animals. We reserve the right to refuse any application.

By signing below, I _____ confirm that all information in this application is true. I give my permission to Animal Protectors of Allegheny Valley to confirm the following information:

- Address
- History of animal cruelty or neglect
- Permission from property owner to house a pet
- Proper veterinary of care for current or past pets

Signature: _____ Date: _____

Revised: 11-4-20