



Adoption/Foster Application

Date:	Name of animal:	<input type="checkbox"/> Dog <input type="checkbox"/> Cat
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 <i>person</i> is the animal(s) listed under?							
Please call ahead and give your vet permission to release records to APAV.							

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:		
<u>Cat adopters:</u> Where will this cat be kept? <input type="checkbox"/> Inside <input type="checkbox"/> Outside		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <u>Dog adopters:</u> Where will this dog be kept? <input type="checkbox"/> Inside <input type="checkbox"/> Outside Is your yard fenced? If yes, what is the height? <input type="checkbox"/> Yes, height: _____ <input type="checkbox"/> No </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> How will this dog be exercised? <input type="checkbox"/> Walks <input type="checkbox"/> Fenced yard <input type="checkbox"/> Park </td> </tr> </table>	<u>Dog adopters:</u> Where will this dog be kept? <input type="checkbox"/> Inside <input type="checkbox"/> Outside Is your yard fenced? If yes, what is the height? <input type="checkbox"/> Yes, height: _____ <input type="checkbox"/> No	How will this dog be exercised? <input type="checkbox"/> Walks <input type="checkbox"/> Fenced yard <input type="checkbox"/> Park
<u>Dog adopters:</u> Where will this dog be kept? <input type="checkbox"/> Inside <input type="checkbox"/> Outside Is your yard fenced? If yes, what is the height? <input type="checkbox"/> Yes, height: _____ <input type="checkbox"/> No	How will this dog be exercised? <input type="checkbox"/> Walks <input type="checkbox"/> Fenced yard <input type="checkbox"/> Park	
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? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you adopted from Animal Protectors of Allegheny Valley previously? <input type="checkbox"/> Yes <input type="checkbox"/> 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
- Criminal convictions or guilty pleas related to crimes against animals or children (Unified Judicial System Portal)
- Permission from property owner to house a pet
- Proper veterinary of care for current or past pets

Signature: _____ Date: _____

Revised: 7-1-21