

## APA Adoption Application and Agreement

First of all, THANK YOU for adopting one of our animals. You have made an important and wonderful lifesaving choice that helps us save more at-risk lives!

### Application

Date: \_\_\_\_\_

Adoption Fees: \$50 for all animals/\$25 seniors over 60 (or indicate other \_\_\_\_\_) Paid by: \_\_\_\_\_

### Personal Information: (Please Print Clearly)

Name: \_\_\_\_\_ 18+ years or older? \_\_\_\_ Yes \_\_\_\_ No

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

Telephone: \_\_\_\_\_ Alternate Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

How did you hear of APA? \_\_\_\_\_

### About Your Home:

Which best describes your home? Apartment House Other: \_\_\_\_\_

Do you have a yard? Yes / No If yes, do you have a fence, and how high is it? \_\_\_\_\_

Do you: OWN / RENT? If you rent, are pets allowed, and are you aware of any restrictions? \_\_\_\_\_

Are you Active Duty Military? Yes / No. If yes, what will you do with your adopted animal if relocated? \_\_\_\_\_

### Family Members:

Please list all the people living in your household and their ages:

- |          |          |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

If you share your dwelling, are all members of the household in agreement concerning the adoption of this animal? Yes / No

Are you or anyone in your household allergic to animals? Yes / No

If yes, please explain: \_\_\_\_\_

ACTion Programs for Animals, 800 W. Picacho, Las Cruces, NM, 88005; 575-644-0505/571-4654; [www.actionprogramsforanimals.org](http://www.actionprogramsforanimals.org)

APA name of adopted animal: \_\_\_\_\_ Brief description of animal: \_\_\_\_\_

Verify Identity of Adopter (DL, etc.): \_\_\_\_\_

Last updated: April 2015

Please list all animals living in your household and their breeds and ages:

1. \_\_\_\_\_ 2. \_\_\_\_\_  
 3. \_\_\_\_\_ 4. \_\_\_\_\_

Are all animals neutered or spayed? \_\_\_\_\_ If you have a cat, is it declawed? \_\_\_\_\_

Where do your pets reside (check which applies)? Outside only \_\_\_\_\_ Inside only: \_\_\_\_\_  
 Inside & outside \_\_\_\_\_ Inside during extreme weather: \_\_\_\_\_

Veterinarian name and telephone number: \_\_\_\_\_

Your Adopted Companion Animal:

Are you willing to accept training and transition assistance from an APA trainer/behaviorist? Yes / No

Are you familiar with the modern procedures for housebreaking (for dogs)? Yes / No

Are you aware that animals take time to get used to and be comfortable in a new home/environment and may exhibit shy, scared or unwanted behaviors that will most likely resolve when the animal has become acclimated to his/her new home? Yes / No

Can you handle the normal expenses incurred in maintaining an animal (medical, food, grooming, etc.?) Yes / No

Are you planning on taking your adopted dog on walks off-leash or to local dog parks? Yes / No

How many hours a day would the animal be left alone? \_\_\_\_\_

Have you ever had a pet before? Yes / No

If yes, list a few of your most recent previous pets, how long you had them, and what happened to them if you no longer have them.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

References:

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_ How long have you known this person? \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_ How long have you known this person? \_\_\_\_\_

