

BERKSHIRE HUMANE SOCIETY – DOG ADOPTION APPLICATION



NAME: _____

You must have a valid license or photo ID with a current address

Name:			Home Phone:		
Address:			Cell Phone:		
City:	State:	Zip:	Email:		
Employer:			Work Phone:		
Occupation:					
Do you :	<input type="checkbox"/> Own		<input type="checkbox"/> Rent		<input type="checkbox"/> Live with Parents
	<input type="checkbox"/> House		<input type="checkbox"/> Apartment		<input type="checkbox"/> Condo
(check one on each row)	<input type="checkbox"/> Mobile Home – in a park?		<input type="checkbox"/> Yes		<input type="checkbox"/> No

How long have you lived at your present address? _____

If less than one year, please give previous address(es) _____

Landlord's Name (if applicable): _____	
**Phone (Home) _____	(Work) _____
**THIS IS REQUIRED TO HOLD ANY ANIMAL **	

Are you planning to move, vacation or add to your family in the next few months?

If yes, explain _____

INFORMATION ABOUT YOUR HOUSEHOLD

Number of adults _____	Name(s) of other adults in the home:
Number of children _____	
Ages of children _____	
Are there children who visit regularly (grandchildren, stepchildren, partial custody, etc?)	
Age(s) : _____	

What animals have you owned in the past five years? (Previous as well as current)

Name of animal	Species	Age	Sex	Spayed/Neutered	Still own?

Your Veterinarian (used as a reference): _____ Phone: _____

Have you ever applied to adopt from BHS? Yes No

Did you get a pet from us? Yes Year _____ No

Have you ever given up an animal for any reason? Yes No

(If yes, explain) _____

How would you describe your lifestyle?	<input type="checkbox"/> Homebody	<input type="checkbox"/> Social butterfly	<input type="checkbox"/> Workaholic
	<input type="checkbox"/> Entertain at home	<input type="checkbox"/> Active outdoors	<input type="checkbox"/> Have lots of visitors

Tell us why you would like to adopt a dog from us: (Check all that apply)	<input type="checkbox"/> Companion	<input type="checkbox"/> Gift for a friend/relative	<input type="checkbox"/> Hunting
	<input type="checkbox"/> Companion for another pet	<input type="checkbox"/> For a child	<input type="checkbox"/> Watchdog
	<input type="checkbox"/> Other (explain)		

What "bad dog" habits do you think can't be tolerated or would be difficult to manage?	<input type="checkbox"/> Chewing	<input type="checkbox"/> Barking	<input type="checkbox"/> Digging
	<input type="checkbox"/> Play biting	<input type="checkbox"/> Not housebroken	<input type="checkbox"/> Rough Play
	<input type="checkbox"/> Not cat / dog friendly	<input type="checkbox"/> Other	

What temperament and activity level are you looking for in a dog?	<input type="checkbox"/> Mellow	<input type="checkbox"/> Very affectionate	<input type="checkbox"/> Outdoor dog
	<input type="checkbox"/> Athletic / high energy	<input type="checkbox"/> Quiet	<input type="checkbox"/> Lap dog

How will you keep the dog confined to your property?	<input type="checkbox"/> Leash walked	<input type="checkbox"/> Fenced yard	<input type="checkbox"/> A runner
	<input type="checkbox"/> Chain or tie out	<input type="checkbox"/> Fenced area or pen	<input type="checkbox"/> Invisible Fence

Exercise: Do you prefer a dog that	<input type="checkbox"/> Will enjoy walking with me on a leash	<input type="checkbox"/> Will enjoy walking with me on or off a leash	<input type="checkbox"/> Will run, jog or hike with me
	<input type="checkbox"/> Will exercise him/herself in our yard	<input type="checkbox"/> Requires only enough exercise to do his / her "business"	

When it comes to relating to dogs, do you tend to be more...	
<input type="checkbox"/> Consistent ; a real leader (the dog must always sit for a cookie)	<input type="checkbox"/> Lenient ; I like to spoil my dog with lots of love, "Who cares if he sits!"

Owning a pet is a lifetime commitment and responsibility. Unexpected situations may arise where sacrifices will have to be made to keep your pet. Are you willing to make this commitment? _____

A BHS representative may come to your residence prior to an adoption for a home visit.

What is a better time ___AM___PM and day of the week ___M___T___W___Th___F___S___S___

BY SIGNING BELOW, I CERTIFY THAT THE INFORMATION I HAVE GIVEN IS TRUE AND THAT I AM AT LEAST 21 YEARS OF AGE. I GIVE MY VETERINARIAN PERMISSION TO RELEASE ANY AND ALL HEALTH RECORDS OF MY CURRENT AND PAST ANIMALS. I RECOGNIZE THAT MISREPRESENTATION OF FACTS MAY RESULT IN MY LOSING THE PRIVILEGE OF ADOPTING A PET. I UNDERSTAND THAT THE BERKSHIRE HUMANE SOCIETY HAS THE RIGHT TO DENY MY REQUEST TO ADOPT AN ANIMAL, AND I AUTHORIZE INVESTIGATION OF ALL STATEMENTS IN THIS APPLICATION.

Signature: _____ Date: _____

Dog Adopter Survey

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MEET YOUR MATCH™

1.	I have owned a dog before.	YES	NO	Currently own dog(s)
2.	The last time I had a dog was...	2-10 years ago	10+ years	Not currently, but within the past year
3.	My dog needs to get along with other dog	NO	If yes, list names, ages, genders and breeds: YES	
4.	My dog needs to be good with: (circle all that apply)	Children over 8 years old	Children under 8 years old	Elderly People Cats Animals other than dogs and cats
5.	My dog will primarily be an ...	Inside dog	Outside dog	
6.	How many hours will your dog spend outside per day			Hours _____
7.	My dog needs to be able to be alone (per day)	4 hours or less	8 – 10 hours	2 hours or less 12 hours
8.	When I'm at home I want my dog to be by my side ...		All of the time	Some of the time Little of the time
9.	When I'm not at home, my dog will spend her time ...	In the garage In a crate in the house	In the yard	Loose in the house Confined to one room in the house
10.	I want a guard dog	NO	YES	
11.	I want my dog to hunt or herd with me	NO	YES	
12.	I want my dog to be the type that is very enthusiastic in the way she shows she loves people		Not at all	Somewhat Very
13.	I want my dog to be playful.		Not at all	Somewhat Very
14.	I want my dog to be laid back.		Very	Somewhat Not at all
15.	I am comfortable doing some training with my dog to improve manners such as jumping, stealing food, and pulling on the leash.		No training	Some training A lot of training
16.	I (or my children) want to participate in Agility, Flyball or Obedience with our dog		NO	YES
17.	I am interested in a dog with "special needs" (medical or behavioral)		NO	YES
18.	It's most important to me that my dog			
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Name: _____ They are looking for: _____

They looked at: _____

For office use only:	Landlord contact	Date: _____	Comment: _____
	Vet contact	Date: _____	Comment: _____
	Adoption counselor	_____	
	Comments:	_____	

Additional notes:
