



 Dog Adoption Application 

Full Legal Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Spouse/Emergency Contact Name (Full): \_\_\_\_\_

Spouse/Emergency Contact Phone: \_\_\_\_\_

What type of dwelling do you live in?

- House
- Apt/Condo/Townhome
- Mobile Home/RV
- Dorm
- Other: \_\_\_\_\_

Do you rent your home or lot?       Yes    No

Name of complex or mobile home park: \_\_\_\_\_

Landlord's name: \_\_\_\_\_

Landlord's phone number: \_\_\_\_\_

How long have you lived at your current residence?

If less than 2 years, what is your previous address?

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please answer the following questions as completely as possible**

Please list all persons (adults, children, roommates, frequent visitors, etc.) at your current residence.

Full Legal Name	Relation to Applicant	Age	Date of Birth

Is anyone listed above allergic to animals?

Does everyone living in your residence know about, and agree to your decision to adopt today?

Yes No

Please list all pets living at, or frequent, your current residence.

Type of animal	Name	Breed	Age	Sex	Altered?	Length Owned	Indoor/outdoor, both?

Have you owned a pet in the last 5 years that is no longer with you?

Yes No

If yes, what happened to the animal?

Who is your current Veterinarian?

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

How much would you be willing to spend on medical bills if your new dog were to suddenly become ill or injured?

Up to \$100

Up to \$500

Up to \$1,000

Up to \$5,000

Whatever it takes

What would you do if the medical bill exceeds this amount?

Estimate the yearly cost for a dog in your household. This includes, but not limited to, the cost of food, medications, veterinary care, grooming, boarding, etc.

On a typical day, I am:

Mostly at home

Out part time (4-6 hours)

Away for more than 8 hours

Where do you plan to keep your new dog when you are not home?

Do you have a yard?  Yes  No

If yes, is it fenced?

Fence height: \_\_\_\_\_

How would you describe the activity level of your household?

Who will ultimately be responsible for feeding, socializing, and training your new dog?

What behavior problems have you experienced in the past, and how did you resolve them?

Do you plan to move or go on an extended vacation in the next 6 months?  Yes  No

If you have to move, what do you plan to do with your new dog?

Changing an animal's environment may cause changes in behavior, or accidents in the house, that we at LPCHS cannot anticipate. How do you plan to deal with this?

On average, it may take your new dog one month or longer to adjust to its new home and routine, especially if you have other pets. Are you willing to allow for this adjustment period?

Yes No

Under what circumstances will you absolutely not keep this dog?

Name of the dog you are interested in adopting: \_\_\_\_\_

Why are you interested in adopting this particular dog?

I acknowledge that if any information on this application is false or misleading, it is subject to denial.

Signature\_\_\_\_\_Date\_\_\_\_\_