



Dog Adoption Application

Adopting a dog is a lifetime commitment. Please complete this form to assist us in determining whether the dog you want is suitable for your home and lifestyle. When selecting a dog to adopt, it is important to bring your entire family, including your current pets to meet the animal. All information collected on this application is kept confidential.

Date of Application: _____

Name of Dog: _____

Why do you want to adopt this particular dog: _____

Conditions:

- Applicants must **call back** after 24 hours to activate the application.
- If there is no correspondence to the shelter within 48 hours of filling out the application, it becomes void.
- We do not adopt to individuals under the age of 21.
- If you are pregnant, please consider the possibility of allergies developing in your newborn **BEFORE** adopting a pet.
- This application is not a test, and there are no wrong answers. We are only trying to find the most suitable, caring, permanent homes for the animals in our care, and the most appropriate and compatible pets for adopters and their families.
- Spaying or neutering any pet that comes from the Humane Society Dawson is mandatory.
- The Humane Society Dawson reserves the right to refuse adoption to any individual. We will not release the reason for refusal.

★I, _____, **have read and understand application conditions.**

Full Name(s): _____

Physical Address: _____ Box # : _____

City: _____ Province/Territory: _____

Postal Code: _____

Phone (Hm): _____ (Wk): _____



1. Reason for adopting (please check):

- Playmate for Child Pet and Companion Companion for Other Pet Guard dog
 Other: _____

2. Who are you adopting for?

- Yourself Someone else (please indicate): _____

3. Are you 21 years old or over?

- Yes No Date of birth: _____

4. Do you live in a:

- House Apartment Acreage Mobile Home Condo

5. Do you:

- Rent Own Shared

If you rent, does your landlord permit dogs? Yes No

Landlords Name: _____ Phone number: _____

How many people live in the household? :

Adults: _____ Children: _____ Ages: _____

6. Do you have a yard?

- No Fenced Not fenced Partially Fenced Height of fence: _____

7. Where will the dog be housed during the day?

- Inside Outside Both

8. How long will your dog be alone during the day?

9. Where will your dog be housed at night?

- Outside Crate indoors Loose Indoors Other:

10. Do you currently have any other pets?

- Yes No

11. Please provide details (Age, sex, species, etc):



12. Are your current pets' vaccinations up-to-date?

Yes No

13. Are your current pet's spayed or neutered?

Yes No

14. If you answered no to either question 12 or 13, please explain why:

15. How much exercise will your dog get per day?

16. If you do not currently have pets, have you had any in the past?

Yes No

17. If "yes," what became of them?

Gave away (Why?): _____

Passed Away (How): _____

Other: _____

18. Have you previously adopted from an animal shelter?

Yes No

19. Would you permit a home visit by our staff to ensure a good placement for the dog?

Yes No

20. How often do you think your dog should see a veterinarian?

21. How much do you expect to spend annually on your dog?

22. Are you aware of City Bylaws regarding dogs at large (loose dogs)?

Yes No

23. Are you aware of City Bylaws regarding dogs required to have licence tags?

Yes No



By signing here, I certify that the information I have provided is true.

Print Name: _____

Signature: _____

Date: _____

HSD Rep: _____

1. Personal Reference:

Name: _____

Phone Number: _____

Relationship _____

2. Personal Reference:

Name: _____

Phone Number: _____

Relationship _____