



CARE - ADOPTION APPLICATION FORM

First Name: _____ Last Name: _____

Address: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Email: _____ May we call you at your work?: _____

Do you live in: a rental apartment _____ a rental house _____ your own apartment _____ your own home _____ other? _____

If there are any children in the home, please list their names and ages:

Names: _____

Ages: _____

Please list the names and relationships of other people in your home:

Names: _____

Relationships: _____

Where will your pet be kept during the day?: _____ Where will your pet sleep at night?: _____

Do you have a fenced in yard?: _____ Pen for dog?: _____ Type of shelter outdoors: _____

Have you ever brought an animal to us?: _____ If so, please explain: _____

Have you ever adopted from us?: Yes _____ No _____ If yes, how long ago? _____

Please list your pet's name(s), breed(s) and age(s):

Name	Age	Breed	Where are they now?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do all of your current pets receive monthly Heartworm Prevention & yearly vaccines? _____

Do you agree that if for any reason you must give up this pet, it will be returned to CARE? _____

Do you agree to follow up on all vaccinations (boosters and yearly vaccines)? _____

Do you agree to provide your pet with Heartworm Prevention on a monthly basis? _____

Are you willing to comply with follow-up calls/visits by CARE? _____

Our suggested minimum adoption fee is CI \$100 and will include a 6 month pack of Heartgard together with vaccinations and spaying/neutering. Should all 3 vaccinations not have been done at the time of adoption, follow-up vaccines are not covered by CARE. We do our very best to place only healthy animals for adoption, but animals with unknown backgrounds can become sick. If this occurs, you have the option of returning the animal to CARE, or having it treated at your own expense by your veterinarian. If you choose to return the animal for this or any other reason, please understand that NO REFUND will be given.

I certify that all information I have given is true, and I understand that false information may result in nullifying this adoption.

Signed: _____ Date: _____

Animal Name: _____ Amount Paid: _____ Heartgard Provided: _____

CARE: _____

