	Dog Adoption A	pplication	Name of Dog:		
242 MA ANIMA			Impound #:		
	(Applicants must be at lea	st 18 years of age)	Date:		
SHELTER					
**	Adoption fee is payable with	cash, check or cred	lit/debit card**		
Fill	ing out this application does	not guarantee ado	option approval.		
Name of potential add	pters: 1				
	2				
Address:			Apt. #:		
City:		State:	Zip code:		
Home phone:		Cell phone:			
Email address:					
Are the potential adop	oters employed?	If No, please exp	blain:		
Do you own or rent? _	If you rent, you mus	t provide landlord'	's information.		
Landlord's name and p					
(If you rent, landlord a	pproval is needed before the	adoptable animal v	will be released to a home.)		
Number of adults livin	g in the home (18 yrs or older	r):			
Number of children liv	ing full and/or part time in th	e home:	Ages of children:		
Does anyone living in t	the household have animal re	lated allergies?			
			Is it fenced?		
			se explain:		
Have you ever had to j	but a pet to sleep before?	II yes, piea	ase explain:		
			If yes, what kind(s) and their		
			explain:		
ages (if known): If applicable, are they	spayed or neutered?	If not, please e	explain:		



There are financial responsibilities that comes with owning a pet. Besides food, treats and toys, there are annual veterinary exams and vaccines needed, chronic illnesses to care for and even unexpected emergency expenses. Can you afford to properly care for the adoptable animal?

Name of veterinary clinic that you currently use or intend on using:

What arrangements will you make for the care of the adoptable dog in case of emergency, or if you become unable to care for the pet?

If you move, will you make arrangements to take the dog with you? ______ Under what circumstances would you consider giving up a pet? ______

The Parma Animal Shelter, Inc. is a non-profit organization. Our animals are not for sale, they are for adoption, which means a home must meet the approval before adoption a pet, including but not limited to filling out this form, discussion(s) with an adoption counselor, meeting with the prospective pet and a signed contract. In addition, the Parma Animal Shelter, Inc. reserves the right to turn down a prospective adoption at any time during this process for any reason. I assert that the information I have provided on this form is accurate and true, and have read and understand the above disclaimer.

By signing this application I understand that I am responsible for the well-being of the adoptable dog(s). I will provide proper care and shelter. I will not abandon the adoptable dog(s) at any time. Dogs/puppies must be transported with a leash and collar.

Signature of applicant:	Date:	
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Signature of applicant: _____ Date: _____

**Because you have signed this form does not mean you have been approved to adopt this animal.

Questions? Please contact dogadoptions@parmashelter.org

This section is to be completed by a Parma Animal Shelter, Inc. Adoption Counselor ONLY.					
Adoption Approved: Yes No					
Name of adoption counselor:	_Date:				
Notes:					