



ADOPTION APPLICATION

Lucy Mackenzie Humane Society, Inc.
P.O. Box 702, 4832 Route 44
Brownsville, VT 05037
802-484-LUCY(5829) FAX 802-484-7800
www.lucymac.org

Our intention is not to overwhelm or offend you by any of the following questions. We are advocates for our animals. They have had to endure a tremendous upheaval in their lives and we just want to be sure that we are placing them in the proper, permanent home where both you and they will be happy. Please answer the following questions as thoroughly and honestly as possible.

You must be at least 21 years of age to adopt.

I am applying to adopt a: (circle one) DOG PUPPY CAT KITTEN

Animal you are applying for: _____

Your name: _____ Driver's License number: _____

Mailing Address: _____
City State Zip

Physical Address (if different from above): _____

Home phone: _____ Day phone: _____

Email Address: _____

Names and relationships of other adults living in your home: _____

Number of children under 18 and their ages: _____

How long have you lived at your current address? _____

What was your previous address? _____

How long did you live there? _____

Do you live in a: Single Family Home Duplex Mobile Home Condominium Apartment

If you live in an apartment or condominium, what floor do you live on? _____

How many units are there? _____

Do you own or rent? _____

If you rent, we will need to contact your Landlord for verify that animals are allowed in your home.

Landlord name: _____ Phone: _____

What is your occupation? _____

Employer _____

How long have you worked there? _____

What days do you work? _____ What hours? _____

Spouse's/Partner's occupation? _____

Employer _____

How long have they worked there? _____

What days do they work? _____ What hours? _____

Please draw a map to your home and the surrounding area. Include roads, your land, nearby buildings, structures on your property (such as sheds or barns), fences, etc. We want to see where your house is in conjunction with the roads as well as what the area looks like surrounding your home. It will aid us in ensuring you have selected the right animal for your lifestyle.

List the number and type of animals you have cared for in the past 5 years:

How many of these animals do you still care for? _____

What happened to the ones you no longer have? (circle one or more)

Deceased Lost Gave away Returned to breeder/pet store/shelter

If given away or returned, please explain: _____

Please list all CURRENT animals you are caring for:

<u>Species</u>	<u>Name</u>	<u>Age</u>	<u>Sex</u>	<u>Spayed/ Neutered?</u>	<u>Date of last Rabies and Distemper Vaccinations</u>

Who is your veterinarian? _____ Phone _____

Do we have your permission to verify your records with your veterinarian? YES NO

Adopting a dog or cat brings with it a lot of responsibility, including annual veterinarian visits, vaccinations, and possible emergency care. This is more expensive than many people realize. Are you aware of and prepared to assume the financial responsibilities for this animal? YES NO

How much do you expect to spend annually caring for a pet? _____

Why do you want to adopt this animal? _____

Who in your household will be primarily responsible for the care of the animal you wish to adopt?

PLEASE FILL OUT THIS SECTION IF YOU ARE APPLYING FOR A DOG OR PUPPY

Will this be the first dog you've cared for as an adult? YES NO

Will this dog/puppy live inside your home? YES NO

If no, where will it live? (circle all that apply)

Dog house Kennel or pen Barn Cable run
 Fenced area Loose in yard Basement

If yes, when the dog/puppy is outside, how do you plan to keep it confined to your property?
 Circle all that apply.

Trained to boundaries Fenced area Tied Kenneled
 Under ground fence Cable run Walked on a leash

If you have a fenced area, what are the dimensions (include height)? _____

Is there shelter and shade available? _____ What kind? _____

Where will the dog be when:

you are gone for the day or a few hours: _____

on a vacation: _____

Do you plan to exercise this dog/puppy on a daily basis? _____ How? _____

Do you intend to take your new dog/puppy through obedience training? YES NO

What kind of behavior traits in a dog or puppy do you find unacceptable? _____

PLEASE FILL OUT THIS SECTION IF YOU ARE APPLYING FOR A CAT OR KITTEN

Where will this cat/kitten live? (circle all that apply)

Inside only Inside & outside Outside only
 House Barn Garage/Porch Basement

Where will the cat/kitten be if you are away for the day? _____

Where will the cat/kitten be if you are on a vacation? _____

Do you plan to have this cat/kitten de-clawed? YES NO NOT SURE

PLEASE READ AND INITIAL:

LMHS receives animals from a variety of sources including stray and abandoned animals. We also accept animals surrendered by owners. While we make every effort to screen animals for both health and behavioral issues, LMHS cannot guarantee the health or temperament of any animal. By initialing here, you acknowledge you have read and accept this statement. _____

DISCLAIMER

If Lucy Mackenzie Humane Society (LMHS) feels the animal you are applying for is not appropriate for you, your family and/or lifestyle, we will be more than willing to work with you in choosing the pet best suited for your needs as well as taking the animals needs into consideration. We work very hard to permanently place our animals in homes where both you and they will be happy.

LMHS reserves the right to verify all information on this application. False information of any kind will result in an automatic refusal of your application. We also reserve the right to refuse any adoption application for any reason.

This completed application is the property of LMHS and is not to be removed from the LMHS files without explicit approval of the Executive Director.

Your signature below verifies that the information you are submitting in this application is true and complete to your knowledge.

Signature_____ Date_____

Please print your name_____

Application reviewed by (to be entered by a member of staff):_____

Now what? Once you have completed this application, hand it to a member of staff to review. We'll want to make sure we have all the information we need in order to make a decision.

- Please let your Veterinarian know you've filled out an adoption application and authorize them to release your records to us.
- We will not make a decision on an application until **all** members of the household have met the animal.
- If you are applying for a dog and already have a dog, you will need to bring him/her to the shelter to meet your potential new dog and, once again, we will not make a decision until the dogs have met.
- We ask that you call and check the status of your application two days after it's been submitted. Remember the shelter is open 12 to 4 Tuesday – Saturday, and 12 – 7PM on Thursday. We will not have an answer for you on the days that we are closed.

FOR OFFICE USE ONLY

Staff member: _____ **Date:** _____

Staff comments: _____

Landlord verification:

YES **NO** **Left message** **Date** _____

Veterinary verification:

Are all animals current on vaccinations: **YES** **NO**

Are all animals spayed or neutered? **YES** **NO**

If no, why? _____

Town Clerk verification:

Do they own their home? **YES** **NO** **Are all dogs licensed?** **YES** **NO**

Approved

Disapproved

Why? _____

