

SMALL ANIMAL ADOPTION APPLICATION

SOUTHWEST METRO ANIMAL RESCUE AND ADOPTION SOCIETY

Please take time to accurately complete this application

. Each question on this application must be completed in as much detail as possible. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Date _____ Name _____

Name of Spouse _____

Marital Status: Single____ Married____ Engaged____

Address _____

City _____ State _____ Zip _____

Daytime Phone # () _____ Evening Phone # () _____

Drivers License # _____

Are you under 21 years of age? Yes____ No____ If Yes, what is your age? _____

E-mail address _____

Residence: (check one) ___ House ___ Condo ___ Apartment ___ Hobby Farm ___ Mobile Home

Do you Own or Rent? ___ Own ___ Rent If you rent, do you have permission from your landlord to have a pet? Yes____ No____

Name of Landlord _____ Phone # () _____

Are you planning on moving in the next 6 months? ___ Yes ___ No If yes, where and when? _____

Do you have children under the age of 18 living in the household? Yes____ No____ If yes, list their ages _____

If you have children, what has been their exposure to the type of small animal you are considering to adopt? None____ Some____ A lot____

Excluding children, spouse and applicant, list any other residents living in the household

1) Name _____ Relation _____

2) Name _____ Relation _____

Is everyone living in the household aware of the decision to adopt a pet? Yes____ No____

If not, list their name (s) _____

Who will be the person responsible for the daily care of the pet such as feeding and cleaning the cage? _____

What is the activity level of your household? ___ Quiet ___ Active ___ Very Active

How often do people visit your home? ___ Seldom ___ Occasionally ___ Very Frequently

Are you familiar with your local animal ordinances? (the number of pets allowed to reside in a household?) _____

Are you interested in an indoor or outdoor pet? ___ Indoors ___ Outdoors ___ Both

If both, explain _____

As an adult, would this be your first *pet of the type* you are considering? (excluding childhood pets) Yes____ No____

If this is *not* your first as an adult, what has been your experience with the type of pet you are considering?

___ Had one or two ___ Knowledgeable & Experienced

Describe your past experience and educational experience you have had with the type of pet you are considering: _____

Please provide a description of how you would correct your new pet if it showed destructive behavior like scratching or biting _____

List all of the pets you have owned within the past 7 years:

PET #1 Type (i.e. rabbit, dog cat, etc): _____ Spayed/Neutered? Yes ___ No ___ Male ___ Female ___

Housed: Indoors ___ Outdoors ___ Both ___ If both, explain _____

Do you still have this pet? Yes ___ No ___ If no, explain in detail what happened to the the pet _____

PET #2 Type (i.e. rabbit, dog cat, etc): _____ Spayed/Neutered? Yes ___ No ___ Male ___ Female ___

Housed: Indoors ___ Outdoors ___ Both ___ If both, explain _____

Do you still have this pet? Yes ___ No ___ If no, explain in detail what happened to the pet _____

PET #3 Type (i.e. rabbit, dog cat, etc): _____ Spayed/Neutered? Yes ___ No ___ Male ___ Female ___

Housed: Indoors ___ Outdoors ___ Both ___ If both, explain _____

Do you still have this pet? Yes ___ No ___ Of no, explain in detail what happened to the pet _____

(If extra space is needed to list additional pets, use the bottom of this page and/or margin area)

Have your own pets been introduced to other animals? Yes ___ No ___ If yes, how did they react? _____

Do you understand the steps required to properly introduce your new pet to the other animals currently living in your home? Yes ___ No ___

Did your previous pets and/or your current pets receive annual veterinary care? Yes ___ No ___

Name of attending clinic _____ Phone # Of Clinic _____

Name of Veterinarian _____ Who's name is listed on the account? _____

What is your occupation? _____

Spouses Occupation _____

How many hours a day will the pet be left alone? _____ On the average, how many evenings per week do you spend at home? _____

Are you and/or your family frequent travelers? Yes ___ No ___

If yes, explain:

How much do you think it will cost to take care of this animal each year? (food, supplies, vet bills, major medical care if needed, etc.) \$ _____

What activity level are you looking for in a pet?

___ Calm (i.e. will sit on your lap and cuddle) ___ Semi-active (i.e. will require medium level of stimulation, etc.)

___ Active (i.e. will require daily mental and physical stimulation, constant attention, etc.)

Do you know if anyone living in the household is allergic to the type of pet you are considering to adopt? Yes ___ No ___ (answer the 2 following questions accordingly)

If no, if you discover that someone living in the household is allergic, or develops allergies, are you willing to spend additional money on allergy medications? Yes ___ No ___

If you know of someone living in the household that IS allergic to the pet, is that person currently on allergy medications? Yes ___ No ___

Are you prepared financially for emergency medical and/or major medical care for the pet? Yes ___ No ___
(Please be aware that emergency and major medical care can be expensive)

What are your reasons for wanting to adopt? (check all that apply)

Companion for me Companion for other pet Companion for Children House pet Gift
 Other _____

IMPORTANT

READ RETURN-EXCHANGE POLICY ON THE REVERSE SIDE OF THIS APPLICATION BEFORE SIGNING

PLEASE READ CAREFULLY

Although the screening process may seem excessively time-consuming, it is important to keep in mind that screening benefits potential adopters as much as it benefits the animals. Adoption screening increases the likelihood that you will adopt the animal that is right for you! Like humans, animals have unique personalities, backgrounds, temperaments and needs. Not every animal is appropriate for every home. Adoption applications and consultations are important tools in the decision making process. This form, along with a consultation with a Southwest Metro Animal Rescue representative are designed to help you find the animal most compatible with your lifestyle. Southwest Metro Animal Rescue is responsible for helping potential adopters assess the compatibility of a companion animal.

I understand and accept that it is Southwest Metro Animal Rescue’s prerogative to decide which home is most appropriate for the individual pet, and therefore I will not take issue with the decision. Unless otherwise indicated by Southwest Metro Animal Rescue, I may be considered for another pet.

I HAVE READ THE ABOVE STATED APPLICATION CAREFULLY AND CERTIFY THAT THE INFORMATION I HAVE GIVEN IS ACCURATE AND TRUE. I UNDERSTAND THAT OMISSION OF INFORMATION AND/OR FAILURE TO ANSWER ALL QUESTIONS AND SIGN THE APPLICATION CAN RESULT IN THIS APPLICATION BEING DECLINED. ALSO, IF AN OMISSION OR UNTRUTH IS DISCOVERED AFTER AN ADOPTION TAKES PLACE, I UNDERSTAND AND ACCEPT THAT SOUTHWEST METRO ANIMAL RESCUE HAS THE RIGHT TO ANNUL THE ADOPTION AND RECLAIM THE PET. I UNDERSTAND THAT IF THE PET IS RECLAIMED THERE WILL NOT BE A REFUND OF MONEY. I HAVE ALSO READ AND AGREE TO THE RETURN/EXCHANGE POLICY INCLUDED IN THIS APPLICATION.

Signature _____ Date _____

Spouse’s Signature _____ Date _____

Representative’s Signature _____ Date _____

-----OFFICE USE ONLY BELOW THIS LINE-----

Case # _____ Breed _____

Animal Name _____

Southwest Metro Animal Rescue Representative _____

Comments _____

SMALL ANIMAL RETURN-EXCHANGE POLICY

SOUTHWEST METRO ANIMAL RESCUE AND ADOPTION SOCIETY

1. I understand that Southwest Metro Animal Rescue cannot guarantee the health of the animal, nor can they be held responsible for their behavior after adoption.

When adopting a pet from SMARAS, you are agreeing to be responsible for any and all medical expenses for the adopted pet.

2. If you need to return the pet for **health reasons**, and you desire an exchange certificate, you may do so within ten (10) days from adoption. An exchange certificate is applicable towards the exchange of an animal of equal or lesser value pending consultation with a SMARAS Representative to determine if the exchange pet is appropriate for the new home. We understand it may take time to find the appropriate pet for the household; therefore, exchange certificates will be valid for up to one (1) year from adoption.
3. To be eligible for an Exchange Certificate, you must provide SMARAS with the adopter's copy of the Adoption Agreement/Contract and valid picture identification. Only one Exchange Certificate can be issued per family.
4. No exchange certificate will be issued for reasons that should have been considered before making the decision to adopt a pet such as (but not limited to):

Allergies, existing or developed
Not enough time for pet
Not housebroken
Moving, can't keep
Scratches the furniture

Not wanted by spouse and/or children, etc.
Digs holes in yard
Too playful for people and/or other pets
Sheds too much in house

The above-listed reasons, as well as similar behaviors and situations, should be considered prior to adopting an animal. If you are not prepared to handle behavior issues that may arise, it is in your best interest (and the animals) to postpone adoption at this time. Should you decide to postpone the adoption at this time, or take some time to reconsider, SMARAS understands your decision and appreciates your honesty.

If for any reason you are unable to keep the pet, health reasons or otherwise, adopter is required to contact SMARAS for the prompt return of the animal without making any charges of any kind for any liabilities.
This policy is required for the life of the adopted pet.

THERE IS NEVER A REFUND OF MONEY

YOUR SIGNATURE ON THIS APPLICATION INDICATES THAT YOU HAVE READ AND FULLY UNDERSTAND THE RETURN/EXCHANGE POLICY AND THAT YOU AGREE TO ABIDE BY THE POLICIES.