

300 Lynwood St. Fall River MA 02721 1-5h08-677-9154 www.foreverpaws.com



	_			Official Use Only	•	
					elor:	
					· <u> </u>	
	Male	Female	Neutered/Spayed:	Age:	Name:	
not be cons		e is no righ	t or wrong answer. This	_	ere is a suitable match. Incon elp the Shelter's staff achiev	
Please initia	al after readi	ng the abov	e statement:			
Which anim	al are you ir	nterested in	adopting? Name:		Breed:	
Apt. #	City:				State:	. Zip Code:
Home Phon	e:		Cell Phone:		Work Phone:	
Occupation:			Email:		Best time to reach you: .	
	Be at leastHave theHave youHave a value	st 21 years of consent of r landlords alid governm	all adults living in your ho consent to have the pet o nent-issued photo ID	on their property	As	
D					_	
Dog Exp	erience l	History				
Have you ov	wned a cat b	efore?	Yes No			
Have you ev	ver adopted f	rom a shelt	er before? Yes I	No Which Shelte	er?	
Have you ev	ver surrende	red an anim	al to a shelter? Ves	No Which	Shelter?	



Other

Dog

Other .

Cat

Forever Paws Animal Shelter

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Living Arrangement Details

Please provide inform	nation regarding yo	ur living arrangements.					
Type of residence:	House Apar	rtment Multifamily	Condo	Public Housing	Mobile Ho	ome	
Special circumstance	es: With Parent	s Student Residenc	е				
Do you: Own	Rent If you ren	t, please list the name ar	nd phone num	ber of the owner:			
Owner's Name:				Owner's Ph	one:		
Have you obtained pe	ermission for a pet?	Yes No					
How long have you li	ved at this address	?					
Are you planning to r	move in the next six	months? Yes 1	No				
If you do move, what	will you do with pe	et?					
How many people liv	e in your home?	Adults: Childre	en	Age of Children:			
Does anyone in your	home have allergie	s to pets? Yes	No				
Please tell us about	your currents pets:	:					
Dog/Cat/Other	Breed	Name	Ag		they been /neutered?	Are vaccir currer	
Dog/Cat/Other Dog Cat	Breed	Name	Ag				
Dog Cat		Name		spayed	/neutered?		
Dog Cat				spayed	/neutered?	currer	nt?
Dog Cat Other Dog Cat				spayed	/neutered?	currer	nt?
Dog Cat Other Dog Cat				spayed	/neutered?	currer Yes	No
Dog Cat Other —— Dog Cat Other —— Dog Cat				Ye	s No	currer Yes	No
Dog Cat Other Dog Cat Other Dog Cat Other Other Dog Cat				Ye	s No	Yes	No No
Dog Cat Other Dog Cat Other Dog Cat Other Other Dog Cat				Ye	s No	Yes	No No
Dog Cat Other Dog Cat Other Dog Cat Other Other Dog Cat				Ye st five years:	s No	Yes Yes	No No



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Pet Plans, Care, and Lifestyle

Please provide your veterinarian int	formation.					
Veterinarian's Name: Veterinarian's Phone:						
Can you afford veterinary care, groo	oming, emergencies, supplies	and food for lifetime of this pet?	Yes No			
All animals making the transition fro accommodations or training. Are yo		ed time to adjust to a new family ar Yes No	nd may require special			
Who will have primary responsibility	y for the pet's day-to-day care	e (feeding, grooming, exercising, et	c.)?			
Who will have the primary financial responsibility for the pet (food, veterinary care, training, etc.)?						
What do you consider valid reasons	for returning an adopted anim	mal to the shelter?				
Pets can live up to 15 to 20 years, a	are you prepared to take respo	onsibility for this time? Yes	No			
You may have to separate new pets Can this be done in your home?	You may have to separate new pets from existing ones in order to introduce them in a gradual manner. Can this be done in your home? Yes No					
Since many shelter animals have unknown medical histories, are you prepared to provide and pay for any necessary medical treatment that may occur after adoption? Yes No						
Lifestyle With Your Pet						
On average, how many hours do yo	u think you will leave your pe	t alone on a daily basis?				
Which of the following best describ	bes your lifestyle? Check all	that apply:				
You have a noisy home: active family, playful children, other pets, etc.	You have a reasonably sedentary lifestyle. (i.e., watch TV, read)	Lots of children play at your house.	You have a busy household: visits from family, friends, children, gatherings, etc.			
You have a moderate home: normal every day comings and goings.	You have a moderately active lifestyle. (i.e., daily walks)	You live on a busy street.	You work long hours.			
You have a quiet home: mainly "homebodies."	You have a very active lifestyle. (i.e., jog, hike)					
How will your pet spend its days?	Check all that apply:					
Indoors	Indoor Enclosure	Outside Enclosure	Will be an outside pet			
Basement	Crate while alone	Porch				



Shy, but not fearful of

new people

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How will your pet spend its nig	ghts? Check all that apply:		
Indoors	Indoor Enclosure	Outdoor Enclosure	Garage
Basement	Porch		
		•••••••••••••••••••••••••••••••••••••••	
Which of the following applies	to your living arrangements? Che	ck all that apply:	
Fenced in yard	Have a pet door to let feline in and out		
Which of the following are you	looking for in a canine? Check al	l that apply:	
Good with canines	Likes other felines	Must be good with children	Playful
Have lots of energy	Calm, quiet but lovable	Couch Potato	Lap cat

Other

Statement of Understanding

Affectionate

I understand the above questions and authorize investigation of all statements contained in this application. I give Forever
Paws Animal Shelter permission to contact my landlord, veterinarian, or references to verify said statements. I understand
that misrepresentation or omission of facts called for is cause for denial of adoption.

Please sign and date.	
Signature	Date



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Adopting a pet is a lifetime commitment; therefore the shelter's adoptions are non-refundable!

Please initial	each of the following statements:	
	I understand that I am not purchasing a pet but adopting and saving the I am financially able to care for this pet. I will not abuse or mistreat the else to do so.	
	I will not sell or give the adopted animal to anyone. If I am unable to kee to continue its care I will return it to Forever Paws.	ep this animal or unable
	_ I understand that the pet is from unknown origin and the medical histor	y is not available.
	_ I understand that Forever Paws is not responsible for any medical treat	ment and medical bills.
	I understand that although the pet may appear healthy at this time, it co medical problems, not immediately apparent to the shelter staff.	uld have a variety of
	I understand that Forever Paws tries to place only healthy animals with will not knowingly adopt an unhealthy or unsafe animal. I understand the guarantees, either expressed or implied, regarding the health disposition animal adopted.	at the shelter offers no
	_ I understand that Forever Paws has a No Refund or Transfer Policy . It following the adoption, I may return my pet to the shelter in certain circ	
	 I understand that there is an adjustment period with all new pets and the necessary for a successful relationship. 	nat proper training is
	 I release Forever Paws and its members and representatives of any cla or damages caused by my pet to any person or property. 	ims arising for injury
	 I understand and agree that in completing this application Forever Paws my application. 	s has the right to deny
	elow I hereby acknowledge that I have read the Adoption Agreement set for bound by all such terms in the event that this application is approved by F	
Please sign a	and date.	
Signature	Г	late