



Forever Paws Animal Shelter

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



DOG/PUPPY ADOPTION FORM

For Official Use Only

Date: _____ ID#: _____ Adoption Counselor: _____

Breed: _____ Color/Markings: _____

Male Female Neutered/Spayed: _____ Age: _____ Name: _____

Please provide all information required to assist us in determining whether there is a suitable match. Incomplete applications will not be considered. **There is no right or wrong answer.** This information will help the Shelter’s staff achieve its goal of finding forever homes for the animals in our care.

Please initial after reading the above statement: _____

Which animal are you interested in adopting? Name: _____ Breed: _____

Adopter Information

(ONE person) Adopter Name: _____

Address: _____


Apt. # _____ City: _____ State: _____ Zip Code: _____

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

Occupation: _____ Email: _____ Best time to reach you: _____

Please initial each of the following statements. To be considered for adoption you need to:

_____ Be at least 21 years old 

_____ Have the consent of all adults living in your household 

_____ Have your landlords consent to have the pet on their property 

_____ Have a valid government-issued photo ID 

_____ Understand that the shelter reserves the right to refuse the adoption of any animal 

Dog Experience History

Have you owned a dog before? Yes No

Have you ever adopted from a shelter before? Yes No Which Shelter? _____

Have you ever surrendered an animal to a shelter? Yes No Which Shelter? _____



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Living Arrangement Details

Please provide information regarding your living arrangements.

Type of residence: House Apartment Multifamily Condo Public Housing Mobile Home

Special circumstances: With Parents Student Residence

Do you: Own Rent If you rent, please list the name and phone number of the owner:

Owner's Name: _____ Owner's Phone: _____

Have you obtained permission for a pet? Yes No

How long have you lived at this address? _____

Are you planning to move in the next six months? Yes No

If you do move, what will you do with pet? _____

How many people live in your home? Adults: _____ Children _____ Age of Children: _____

Does anyone in your home have allergies to pets? Yes No

Please tell us about your current pets:

Dog/Cat/Other	Breed	Name	Age	Have they been spayed/neutered?		Are vaccinations current?	
Dog Cat				Yes	No	Yes	No
Other _____	_____	_____	_____				
Dog Cat				Yes	No	Yes	No
Other _____	_____	_____	_____				
Dog Cat				Yes	No	Yes	No
Other _____	_____	_____	_____				

Please tell us about any pets you don't have currently, but had within the last five years:

Dog/Cat/Other	Breed	Length of Ownership	What happened to pet?
Dog Cat			
Other _____	_____	_____	_____
Dog Cat			
Other _____	_____	_____	_____



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Pet Plans, Care, and Lifestyle

Please provide your veterinarian information.

Veterinarian's Name: _____ Veterinarian's Phone: _____

Can you afford veterinary care, grooming, emergencies, supplies and food for lifetime of this pet? Yes No

All animals making the transition from shelter to a new home need time to adjust to a new family and may require housetraining and behavior training. Are you willing to provide any needed training? Yes No

Would you consider professional obedience classes? Yes No

Who will have primary responsibility for the pet's day-to-day care (feeding, grooming, exercising, etc.)? _____

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 animal to the shelter?

Pets can live up to 15 to 20 years, are you prepared to take responsibility for this time? Yes No

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 you think you will leave your pet alone on a daily basis? _____

Which of the following best describes 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)

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How will your pet spend its days? Check all that apply:

Indoors
Basement

Indoor Enclosure
Crate while alone

Outside Enclosure
Porch

Will be an outside pet

.....



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How will your pet spend its nights? Check all that apply:

Indoors
Basement

Indoor Enclosure
Porch

Outdoor Enclosure

Garage

Which of the following applies to your living arrangements? Check all that apply:

Fenced in yard
No fence, but will leash
walk the dog

Tie-out in yard

Electric fence

Kennel

Which of the following are you looking for in a canine? Check all that apply:

Good with other canines
Have lots of energy
Affectionate
Must be completely
house trained
Shy, but not fearful of
new people

Likes felines
Calm, quiet but lovable
Good watch dog
Willing to adopt if only
partially house trained

Must be good with children
Couch Potato
Not a nipper
Walking partner

Playful
Lap dog
Not a constant barker
Jogging/Running partner

Other _____

Statement of Understanding

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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PET ADOPTION AGREEMENT

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 life of a homeless pet. I am financially able to care for this pet. I will not abuse or mistreat the animal or allow anyone else to do so.
- _____ I will not sell or give the adopted animal to anyone. If I am unable to keep this animal or unable to continue its care I will return it to Forever Paws.
- _____ I understand that the pet is from unknown origin and the medical history is not available.
- _____ I understand that Forever Paws is not responsible for any medical treatment and medical bills.
- _____ I understand that although the pet may appear healthy at this time, it could have a variety of medical problems, not immediately apparent to the shelter staff.
- _____ I understand that Forever Paws tries to place only healthy animals with a good disposition and will not knowingly adopt an unhealthy or unsafe animal. I understand that the shelter offers no guarantees, either expressed or implied, regarding the health disposition and/or breed of the animal adopted.
- _____ I understand that Forever Paws has a **No Refund or Transfer Policy**. I understand that following the adoption, I may return my pet to the shelter in certain circumstances.
- _____ I understand that there is an adjustment period with all new pets and that proper training is necessary for a successful relationship.
- _____ I release Forever Paws and its members and representatives of any claims arising for injury or damages caused by my pet to any person or property.
- _____ I understand and agree that in completing this application Forever Paws has the right to deny my application.

By signing below I hereby acknowledge that I have read the Adoption Agreement set forth on this page. I agree to be bound by all such terms in the event that this application is approved by Forever Paws.

Please sign and date.

Signature _____ Date _____