



Adoption Application

12488 S. Harlan Road, Lathrop, CA 95330
 Hours: 10am to 5pm Tuesday through Saturday
 Tel: 209-982-5073 www.PetsnPals.org

Staff Member Assisting

Canine

Feline

Pet's Name

Pet's ID Number

Your Name

Home Phone

Work Phone

Email Address

Street Address

City

Zip Code

Time at this Address

If You Rent, You Will Need Landlord Approval

Rent

Landlord's Name

Apartment

Landlord's Tel #

Questions Regarding Canine Applicants

Do you have a **completely secure** fenced yard?

How high is it?

Will this pet be chained up?

Will this pet be kept in a dog run?

Dog run dimensions

Do you have a pool?

Is the pool fenced?

Type of pool fence

Height of pool fence

Dogs require time for training. Do you have the time and are you willing to train and deal with behavior problems(digging,chewing,jumping,etc)?

General Questions For All Applicants

Have you owned a pet before?	Where did you get it?
What other pets do you have in your home now?	
What other pets have you owned in the last 5 yrs?	
What are the names of the other pets?	What are their ages?
Was a pet ever given away?	Why given away?
How many children are in the home?	Their ages
Where will this new pet will be kept?	
Where will this pet sleep?	
Who is your veterinarian?	Veterinarian Tel #
How long will the pet be left alone during the day?	
Can you afford food?	
Can you afford veterinary care?	
Can you afford grooming?	
Is anyone living in your home allergic to pets?	
Have your current/previous pets been spayed/neutered?	If no, why?

Any misleading or untrue statements on this application will result in immediate denial of any adoption from this facility.

By my signature or submission of this form, I verify that the above information is accurate and true and am giving my permission to obtain medical records from my veterinarian.

Signature

Date