

LEAP OF FAITH FURRY PAWz RESCUE **Small animals adoption**

Thank you for your interest in adopting a pet from Leap of Faith Furry Pawz Rescue

Date: _____
Name: _____ Email: _____
Phone (hm): _____ (wk): _____ (c): _____
Address: _____
City: _____ Postal code: _____

Type of residence: ____ House ____ Apt. ____ Condo ____ Mobile Home ____

Do you (check what applies) ? ____ Rent ____ Own ____ Live with owner of home

Please list landlord or property management company and telephone number:

Please list the Names and Ages of all of the people residing in your household:

Name	Age
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

If living with roommates or in part of someone else's home, do you have the consent of all the adults living in the household? ____ Yes ____ No

Does anyone in your household have ANY allergies to ANY animal(s)? ____ Yes ____ No

If yes, please describe: _____

What is your plan if someone in your house is allergic to this new pet? _____

What will happen to this pet if you have to move unexpectedly? _____

Who will be the primary caretaker of this small animal ? _____

Why would you like to adopt this animal?

Please list any and all animal(s) you've owned in the past 5 years, including the ones you own now:
Type/Breed Age Sex "Fixed?" Still Own?

Who is your Veterinarian? _____ May we call him/her? _____

Please choose the option(s) that best describes where you will keep your pet. Circle all that apply:

Outdoor hutch Cage in garage or basement Cage or hutch in barn
Loose indoors with access to a litter box Cage in the house Shed
Outdoor hutch with run Other: _____

Many small animals are surrendered to us by the parents of the children who lost interest in them. Some small animals can live 7 years old or older. If adopting this animal as a child's pet, what is your plan for his/her future if the child loses interest?

Do you have any questions or concerns about adopting a small animal? Is there anything about small animal care you would like to know more about?

By signing below, I hereby submit that the information provided by me is true. Any false information may result in my losing the privilege of adopting a pet. I understand that leap of faith furry pawz rescue has the right to deny my request to adopt an animal.

Signature: _____ **Date:** _____

For Office Use Only

License No: _____ Providence _____ Exp Date: _____
DOB: _____
Address Verification: _____ Landlord Approval: _____
Vet Reference: _____
Adoption Counsel: _____ Date: _____
Approved: ____ Yes ____ No