



Personal Information:

Name: _____
Home Phone: _____ Cell #: _____
Spouse's Name (if applicable): _____
How many children in your home? _____ Ages: _____
Are there any others residing in your home? Please List: _____

Employer Name: _____ Phone: _____
Employer Address: _____
City: _____ State: _____ Zip: _____

Residential Information:

Home Address: _____
City: _____ State: _____ Zip: _____

Is this where the pet will live with you? _____
How long have you resided at this address? _____
If less than two years, what was your previous address? _____

Do you Rent or Own? _____ Apartment? _____ House? _____
Condo? _____ Mobile Home? _____
What happens to the pet if you move? _____

If Renting, what is your Landlord's name? _____
Landlord's Phone Number: _____

Have you received permission from your landlord? _____
What do you think makes this particular pet a good choice for you? _____

Have you had experience with this particular breed? _____
Do you have a fence around your yard? Please describe: _____

How will you exercise your pet?

How many hours are you away from home during the average work day? _____

Where will your pet be kept during that time? _____

Where will your pet be sleeping during the night? _____

What kind of other pets do you have in the home? Please list:

Your Veterinarian's Name: _____

City: _____ Phone Number: _____

Does anyone in the household have allergies? _____

Have you or anyone in your household ever been convicted of animal cruelty, neglect, or abandonment? _____

Have you ever had to give up a pet? Please explain: _____

I certify that all information provided on this form is true. I give permission to Rescuer to verify information as needed. I understand that a home check may be mandatory prior to adopting a pet, also. Any false statement will terminate potential adoption.

Adopting Parents have agreed upon the sum of \$ _____ donation to CLAC for help with expenses incurred by saving this pet from the shelter and vet bills. I agree that the adoption fee is non-refundable and there is no reimbursement if the adoption does not work out. I agree that all expenses incurred after I take possession of pet will be my sole responsibility.

I agree to provide care from this day forward to my new pet. This includes adequate food, water, exercise, shelter, veterinary care, and lots of love. The pet will be kept in the house and will not be tethered outside.

I agree never to sell, trade, or surrender the pet to any agency and agree to return the adopted animal to Country Lakes Animal Clinic if I can no longer care for it.

Adoptive Parent(s) signature(s): _____ Date: _____

(COPY OF DRIVER'S LICENSE OR IDENTIFICATION CARD ATTACHED)

CLAC Representative: _____ Date Approved: _____

Visit Our Website At
www.countrylakesanimalclinic.com