



Humane Society of the Ohio Valley

90 Mount Tom Road Marietta, Ohio (740) 373 - 5959

Adoption Application

Thank You for considering the adoption of an animal from the Humane Society of the Ohio Valley. We require that the following questions be answered as fully and honestly as possible so we may be assured that the pet you wish to adopt is best suited for you.

Before you adopt an animal from the Humane Society of the Ohio Valley, we need you to:

1. Complete the following profile and application as honestly and completely as possible
2. Be aware that in accordance with the shelter, all animals adopted from the Humane Society of the Ohio Valley must be spayed or neutered – failure to do so may result in confiscation by the Humane Officer
3. Be sure you are financially able to provide the needs of the animal
4. Be sure you have adequate time and facilities to care for the animal you are interested in adopting
5. Have the consent of all adults residing in your household
6. Be at least 18 years of age
7. Be aware that few animals are perfect and that you should be prepared to give any animal time to adjust and put forth effort transitioning the animal into its new home
8. **Understand that this is an adoption, not a sale. HSOV reserves the right to postpone or refuse any adoption that is not in the best interest of the animal**

	Cat	Dog	Control Number	Date
Animal's Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Adopter's Name _____	Driver's License / ID# _____			
Street Address _____	City _____			
Home/Cell Phone _____	Email Address _____			
Have you adopted from us before?	___ Yes ___ No			
If yes, what and when?	_____			

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Adoption Application Page 2

Household Information – Check all that apply

- House in town House in country Condo Apartment
 Rent Own Home Live with Parents Trailer
 Room mates Other

Do children under 18 live with you or visit? ____ Yes ____ No If yes, how old? _____

Who will be the pet's primary caretaker? _____

Rate your household activity level ____ Quiet ____ Active ____ Hectic

Pet History and Experience – What is your experience with pets? (check all that apply)

- First time dog owner Had dog(s) as a child Have had 1 or 2 dogs Dog experienced
 First time cat owner Had cat(s) as a child Have had 1 or 2 cats Cat experienced

How much do you expect to spend on veterinary care for your new pet in the next year? _____

Please list the animals that live with you currently and in the last 5 years

Name and type Dog or Cat	Age/Sex	Spayed- Neutered	Vet Name and Phone Number	Still with you?	Length of Ownership	Staff use Only
1		Yes No				S N C
2		Yes No				S N C
3		Yes No				S N C
4		Yes No				S N C
5		Yes No				S N C

Do you have any animals in your home that are **NOT SPAYED OR NEUTERED** ____ Yes ____ No

Expectations

What personality traits are you looking for in your new pet? _____

How long will the pet be without human contact during the day? _____

What type of protection and shelter do you have outside for your pet? _____

Is there any behavior problem you feel you would be unable to live with? If so, please describe:

Where will this pet stay when you travel or go on vacation: _____

As part of our commitment to having each adoption be a success, we'll be keeping in touch with you.

Do you object to a representative of HSOV contacting you at home? ____ Yes ____ No

If yes, why? _____

What is the best time and phone number to call you for a telephone follow-up? _____

Do you need assistance in getting any unspayed or neutered animals fixed? ____ Yes ____ No



Adoption Application Page 3

Complete This Section for Cat and Kitten Adoptions

Why are you adopting a cat?

- Companion for self
 Companion for another animal
 Barn Cat/Mouser
 Child's pet
 Office cat
 Gift for whom?

Do you have a certain type/breed of cat in mind? ____ Yes ____ No If yes, describe:

Do you plan on de-clawing your cat? ____ Yes ____ No ____ Unsure

How much time do you have to interact with your cat?

- Minimal interaction during the week/lots of time on the weekends
 Cat will be with me at home and at work time also
 Cat will be my constant companion at home
 Other – explain:

How will you resolve behavior problems such as clawing furniture or failure to use litter box?

Complete This Section for Dog and Puppy Adoptions

Why are you adopting a dog?

- Companion for self
 Companion for another animal
 Hunting dog
 Child's pet
 Office dog
 Gift for whom?
 Protection

Do you have a certain type/breed of dog in mind? ____ Yes ____ No If yes, describe:

How will you resolve behavior problems such as chewing, barking and housebreaking issues?

How will the dog get exercise?

- Walks
 Fenced Yard - size?
 Running Loose
 Other – explain _____

PLEASE READ AND SIGN

I certify that all the information in this application is true and understand that false information may void the application.

I also understand that failure to comply with the completed adoption contract will result in my inability to adopt from the Humane Society of the Ohio Valley.

Signature _____ Date _____



Adoption Application Page 4

I AGREE TO THE FOLLOWING CONDITIONS

FOR THE ADOPTED ANIMAL:

1. To provide food, water, shelter and veterinary treatment throughout its lifetime.
2. Not to sell, trade, give away or allow it to be used for experimental purposes. If I can no longer keep it or care for this animal, I agree to return the animal to the Humane Society of the Ohio Valley.
3. If health is found to be unsatisfactory, I may return the animal to the Humane Society of the Ohio Valley for a full refund of adoption fees. Upon returning the animal to the shelter for medical reasons, a signed veterinarian statement must accompany all the original paper work stating the medical condition. Any refund after 14 days of adoption will be taken to the Board Members at the next scheduled board Meeting for consideration.
4. I understand that animals are unpredictable. Therefore, I waive and release all claims, past, present and future against The Humane Society of the Ohio Valley, it's officers and staff, for any damages and or injuries to person or property that arises from my ownership of this animal.
5. I agree to purchase an Ohio Dog Tag by January 31st of every year as required by LAW. If I reside in another County or State, I agree to abide by my County or State Dog Tags laws.
6. I agree that the Humane Society of the Ohio Valley may at any time make inquiries to insure adequate care of the adopted animal.
7. I understand the Humane Society of the Ohio Valley does not have the resources to test every animal for different types of health issues. I may request a feline combo or heartworm test for dogs conducted by HSOV at an additional cost before the animal is adopted.

Adopter's Signature _____ Date _____

Adoption approved by _____ Date _____



Adoption Application Page 5

Information Below is for Adoption Counselor Use Only

Adoption Counselor _____

Date _____ Time _____

LL _____ Phone _____

Approved by _____ Restrictions _____

Date _____ Time _____ Counselor _____

Shelter/Facilities _____

Property/Fencing _____

Allergies _____

Address Verified _____

Approved For _____

Comments

