



# 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***

Animal's Name:

Cat	Dog	Control Number	Date

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 \_\_\_\_\_

