



PET ADOPTION APPLICATION

Lakeshore Humane Society

P.O. Box 12

Fredonia, New York 14063

716.672.1991

www.lakeshorehumanesociety.org

Applications must be filled out completely. Must be 21 years of age to adopt. Cat/Kitten fee \$60.00, Dog/Puppy fee \$70.00, Two cats or kittens - \$90.00 fee. Senior Citizen Rates (55+) for cat/kitten fee - \$30.00, puppy fee \$70.00, dog (5 years or older) - \$35.00. There is a pre-home visit before a dog may be adopted (references must be supplied).

Name _____ Home Phone _____
Address _____ Employed at _____
City & Zip _____ Work Phone _____
Your email address _____

Check Type of Housing: Own House _____ Rent House _____ Rent Apartment _____ Years at this address: _____
Previous address if less than 5 years. _____
If you rent, what is your landlord's name _____
Landlord's Phone _____ Does Your Landlord Have a Pet Policy _____
How many adults in the household _____ Children _____ Ages _____ Allergies _____

Why do you want a pet _____
Why do you want this specific pet (**please write pet's name here**) _____

Who will be responsible for the pet's care _____
Will the pet stay inside or outside _____
Do you have an enclosed yard _____ What are the approximate dimensions _____
Will you allow home visits to observe the animal in its new surroundings: Yes _____ No _____
Do you understand how long pets can live and the financial responsibility involved _____
Have you ever adopted an animal from or taken (**please circle the word "from" or "taken"**) an animal to a shelter:
Yes _____ No _____ When _____ Dog _____ Cat _____ Other _____
Why _____

Current Pets: Please include all pets, including small caged ones or barn animals

Type	Age	Sex	Spayed/Neutered	Inside/Outside	Years Owned

Your Veterinarian Is _____ Do not have a vet _____

Pet History: Please list any pets owned in the last 5 years other than those above

Type	Age	Sex	Spayed/Neutered	Inside/Outside	Years Owned

Two references please (other than a Lakeshore Humane Society volunteer):

_____ Telephone Number: _____

_____ Telephone Number _____

All information above is truthful. Should any be found false, and an adoption has been approved based on the above information, the adoption will be terminated.

Signature _____ Date _____