



FURRY FRIENDS ADOPTION APPLICATION

Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-Mail: _____

Occupation: _____

Are you at least 18 years of age? Please circle: YES / NO

How many children live in your household?

Please list ages: _____

Name of animal you are interested in adopting: _____

Please circle: CAT / DOG

Have you ever given up a pet before? Please circle: YES / NO

If yes, please explain: _____

Tell us about your current animal(s)
(Breed, age, sex, spayed/neutered)

Name: _____ Breed: _____

Spay/Neuter: YES / NO Age: _____

Name: _____ Breed: _____

Spay/Neuter: YES / NO Age: _____

How did you hear about Furry Friends:

TV Newspaper Website Radio

Other: _____ Previously Adopted

I agree to return the animal back to Furry Friends if MY situation changes and I cannot keep this animal Initial: _____

Signature: _____

*****STAFF ONLY*****

Furry Friends Staff Signature: _____

Required: APPROVED / DENIED

NOTES: