



DATE: _____

NAME OF ANIMAL INTERESTED IN: _____

Cat / Dog

FURRY FRIENDS ADOPTION APPLICATION

Name: _____

Address: _____

City, State, Zip _____

Phone number: _____ Email: _____

Please certify that you are at least 18 years of age: YES / NO

How many children live in your household?

Please list ages: _____

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

If yes, please explain: _____

Tell us about your current pet(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 AM NO LONGER ABLE TO CARE FOR THIS ANIMAL.

Initial: _____

Signature of Applicant: _____ Date: _____

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

Furry Friends Staff Signature: _____

Required: APPROVED / DENIED

NOTES:

