

I am interested in adopting:



Office use Only
 Ref check 0 1 2 3 4 5

Completed Applications may be submitted via:

FAX: 479-872-2313

EMAIL: adoptions@recycledroversrescue.com

Application to Adopt a Pet

Name (please print) _____ Date _____
Address _____
City _____ State _____ Zip _____
Home phone _____ Work phone _____
Driver's license # _____ State _____ Date of birth _____
E-mail Address _____

Our goal is to find permanent loving homes for animals. We evaluate the animals to make sure they will be suitable family pets. The purpose of this form is to help us evaluate the people as responsible pet owners.

We would like to know about you . . .

Are you a student or other temporary resident? _____

If you move, will the pet go with you? _____

Are you planning to move within the next year? _____

Have you adopted an animal from shelters or rescues before? _____

If so, when? _____ What kind? _____

Do you still have this pet? _____ If not, why not? _____

How did you hear about Recycled Rovers Rescue Adoption Program? _____

. . . and your family or household

Do others in your household know you are planning to adopt a pet? _____

Do you have children at home? _____ What age(s)? _____

Is anyone in the house allergic to animals? _____

Is this pet going to be a gift? _____ For whom? _____

Is someone at home during the day? _____

We would like to know about your other pets . . .

Have you owned pets within the last two years? _____ What kind(s)? _____

Cat	Dog	Other	Breed	Pet's Name	Age	Sex	Spayed/ Neutered	Still Have? Comments

If you do not still have these animals, why not? _____

What brand of food do/did you feed? _____

Are/Were they current on their vaccinations (rabies, distemper, parvovirus, etc.)? _____

Are/Were they spayed or neutered? _____ If not, why not? _____

Were they microchipped? _____ What kind? _____

Did you use Heartworm Prevention? _____ What kind? _____

Did you use Flea & Tick Preventatives? _____ What kind? _____

Who is your veterinarian/vet clinic? _____

I authorize Recycled Rovers Rescue to obtain my animal's medical records from my veterinarian.
Please list owner's name if your name is not listed as the owner at the vet's office

Yes _____ No _____ Owner: _____

Veterinarian's Phone number: _____

****Note: If you cannot supply a current veterinary reference, you may be required to purchase Heartworm and Flea/Tick Prevention at the time of the Adoption of one of our rescued pets.***

. . . and your intentions for a new pet

Pets need food, water, shelter, medical care. Are you prepared to provide all? _____

Pets can become injured or ill and require veterinary care. If your pet requires medical treatment or surgery that will cost several hundred dollars or more, and a good outcome is expected, what would you do? _____

Are there any situations where you might have to return an adopted pet? If so, please explain: _____

The City of Springdale has a leash law for cats and dogs. Do you understand the law? _____

Do you want an indoor or outdoor pet? _____

How many hours a day will the pet be at home alone? _____

Are you willing to provide special training for behavior problems of your pet? _____

Take a look at some of the problems you may have with your pet:

• **Dogs: digging barking, jumping up on people, shedding, chewing, jumping fences, messing in house, fleas and ticks, nipping at heels, biting, fearfulness, aggressiveness**

• **Cats: scratching or biting people, shedding, spraying, jumping on counters or tables, fleas and ticks, scratching furniture, not using litter box, meowing too much**

Would you try to resolve such problems before returning the animal? _____

Why do you want to adopt this animal? _____

We need two local references

(Only ONE may be a family member not living in your household)

Name _____

Address _____

Telephone _____

Name _____

Address _____

Telephone _____

We would like to know more about where you live . . .

Which of the following best describes your home?

- ____ House with fenced yard
- ____ House with outside kennel run
- ____ House with unfenced yard
- ____ Apartment without yard
- ____ Mobile home / Condo with unfenced yard
- ____ Mobile home / Condo with fenced yard
- ____ Farm with livestock
- ____ Other, please describe _____

Do you own or rent? _____ If you are renting, are pets permitted? _____

Does your landlord approve of your plans to adopt a pet? _____

Landlord's name and phone number _____

. . . and where your new pet will live

Do you have an outdoor pet area (dog run, cat pen)? _____

If so, please describe it: _____

What sort of protection is there from sun, rain, snow, cold winds? _____

Will your pet have constant access to fresh, clean water? _____

You must understand that:

1. Animals are **different** from human beings in their responses to human actions.
2. The actions of animals can be **unpredictable**.
3. Animals should be closely **supervised** when they are with **children**.
4. An animal's **behavior may change** after the animal leaves the hospital.
5. Recycled Rovers Rescue makes **no claims** as to the temperament, health, or mental disposition of any animal put up for adoption.
6. **Recycled Rovers Rescue requires adopting owners provide routine veterinary care (including, but not limited to, spaying/neutering, routine vaccines & wellness exams, heartworm and flea/tick prevention).**

If you have any questions about any of this, please talk to the hospital staff.

Here's where you sign

Under penalty of law I swear/affirm that these answers are true and correct to the best of my knowledge. By signing below, I certify that all above information will be found true and any misrepresentation of any facts on my behalf may result in denial of adoption. I acknowledge & understand completely that all pets up for adoption are the sole property of Recycled Rovers Rescue.

I understand that filling out this application does not guarantee me a pet. I understand the placement of the animals is at the discretion of Recycled Rovers Rescue.

I authorize investigation of all statements I have provided on this application. I also understand an authorized representative of Recycled Rovers Rescue may contact me in the future to follow up on the success of this adoption. Any fees associated with the adoption are non-refundable.

Name _____ Date _____

Recycled Rovers Rescue Program reserves the right to refuse any adoption.