

Friends of Attleboro Animal Shelter

Located on Pond St N
 PO Box 592, Attleboro MA 02703
 Phone: 774-203-1862 Fax: 508-276-0444
 Email: Attleboropets@hotmail.com
 Web: www.FAASpets.org



CANINE ADOPTION APPLICATION

PLEASE GIVE CAREFUL CONSIDERATION TO ADOPTING! BE SURE YOUR LIFESTYLE ALLOWS THE TIME, PATIENCE AND EXPENSE THIS PET WILL NEED OVER THE YEARS. ADDING A PET TO YOUR FAMILY IS A 10 TO 15 YEAR COMMITMENT. ANIMALS ARE NOT TOYS OR SHORT-TERM COMMITMENTS AND THEY ARE NOT DISPOSABLE.

PROCEDURE: COMPLETELY FILL OUT AND SIGN THE APPLICATION. YOU WILL HEAR BACK WITHIN 10 DAYS OR PLEASE ASSUME YOUR APPLICATION WAS NOT SELECTED. APPLICATIONS THAT ARE SELECTED WILL GO THRU ALL NECESSARY CHECKS TO ENSURE A PROPER HOME. IF THE ADOPTION IS APPROVED, AN ADOPTION CONTRACT WILL BE SIGNED AND ADOPTION FEE PAID.

**ADOPTION FEE PAYABLE TO FAAS IN THE FORM OF MONEY ORDER, CASH OR CHECK
 ADOPTION FEE PAYABLE TO THE CITY OF ATTLEBORO IN THE FORM OF MONEY ORDER OR CASH**

Date:	Where did you hear about us?		
APPLICANTS INFORMATION <i>(please print clearly)</i>			
Applicants Full Name		Age	
Co-Applicants Full Name		Relationship to Applicant	
Street Address, City, State			
Home Phone		Cell Phone	Email
Applicants Employer / Occupation		Employer Phone	
Co-Applicants Employer / Occupation		Employer Phone	
CANINE INFORMATION			
Name of Dog you are applying for?		Breed	
How did you become aware of this Dog?			
Why do you want to adopt a Dog? <input type="checkbox"/> Family Pet <input type="checkbox"/> Companion <input type="checkbox"/> Protection <input type="checkbox"/> Gift <input type="checkbox"/> Other			
If Gift , Protection or Other please explain.			
What are you looking for in a Dog:			
Age: <input type="checkbox"/> 2 – 6 Months <input type="checkbox"/> 6 – 12 Months <input type="checkbox"/> 1 – 6 Years <input type="checkbox"/> 7 Years +		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No Preference	
Coat: <input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> No Preference		Color Preference:	
Personality: <input type="checkbox"/> Playful <input type="checkbox"/> Calm <input type="checkbox"/> Shy <input type="checkbox"/> Affectionate <input type="checkbox"/> Likes Dogs <input type="checkbox"/> Likes Cats <input type="checkbox"/> Likes Kids			
Health Preference? <input type="checkbox"/> Healthy Only <input type="checkbox"/> Short Term Problems <input type="checkbox"/> Special Needs <input type="checkbox"/> No Preference			
Where will the Dog live? <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Inside and Outside <i>Please explain further below</i>			
Are you willing to take the time to housebreak a dog, and do you understand that changing a dog's environment may cause the dog to have accidents? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you are applying for a puppy or dog that is not housetrained, how will you housetrain?			
What steps have you taken to prepare for a new dog?			
Have you done research on the breed of dog you are interested in? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Why do you want this breed?			
Are you willing to obtain an appropriately sized crate if recommended? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you plan to go to a professional dog trainer and/or obedience School? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If No, Why?			
If Yes, Who?			

If behavioral issues should arise, what actions will you take?			
Who will care for and exercise the new dog?			
How will you exercise the new dog?			
How many hours will the dog be left alone: Daytime?		Evening?	
When no one is home where will the dog stay?			
Where will the dog sleep at night?			
Will the dog be allowed on Furniture? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Will the dog have free run of the house? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If and when you travel where will the dog stay?			
If you have to move what will you do with your new Dog?			
Are you aware of your local ordinance concerning dog licensing? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you aware of your local ordinances concerning leash laws? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been cited for any dog related ordinances? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Does your town or city have any Breed Restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, what are they?			
Do you agree the dog will NOT be used for fighting, breeding, illegal activities or be found at any time in a location where its presence is illegal? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you aware dogs can shed all year long? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you considered the extra expenses that will come with owning a new Dog? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>The cost of owning a dog typically runs from \$500 to \$1500 per year for basic food, routine veterinary care, vaccinations and boarding -- but not including grooming. If a dog is injured or gets seriously ill, extra veterinary care can cost hundreds to thousands of dollars.</small>			
Have all household members met and agreed on a new Dog? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Describe the kind of situations where you might return your adopted dog.			
What reasons do you feel are valid for giving up a pet? <input type="checkbox"/> Fleas <input type="checkbox"/> Shedding <input type="checkbox"/> Expenses <input type="checkbox"/> Noisy <input type="checkbox"/> Chewing/Clawing <input type="checkbox"/> Destructive <input type="checkbox"/> Bites <input type="checkbox"/> New Baby <input type="checkbox"/> Moving <input type="checkbox"/> Marriage or Divorce <input type="checkbox"/> Doesn't Listen <input type="checkbox"/> Pets Medical Condition <input type="checkbox"/> No Time <input type="checkbox"/> Would not Consider <input type="checkbox"/> Other (<i>please explain</i>)			
PET AND VETERINARY HISTORY			
Have you ever had to give up ownership of a pet? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, please explain.			
Do you currently have any pets? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, Please complete the information below. If additional space is needed please write on back.			
	Pet 1	Pet 2	Pet 3
Pet's Name			
Type of Pet / Breed			
Sex / Age			
Spayed or Neutered			
Up to Date with Rabies			
Up to Date with other Vaccines			
Licensed if required			
Indoor or Outdoor			
When did you get this Pet			
Where did you get this Pet			

Current Veterinarian's Name and Telephone number?			
Name of person on file with the Vet?			
If you currently have no pets, please list pets over the past 10 years. If additional space is needed please write on back			
	Pet 1	Pet 2	Pet3
Pet's Name			
Type of Pet / Breed			
Sex / Age			
Spayed or Neutered			
Indoor or Outdoor			
When did you get this Pet			
Where did you get this Pet			
If deceased - When			
If deceased - Cause of Death			
If Rehomed - When			
If Rehomed - Why			
Veterinarian's Name			
Name of person on file w/Vet			
Name of Veterinarian you will use for your new pet?			
Contact info for Veterinarian you will use for your new pet?			
HOUSEHOLD INFORMATION			
Have all household members been around pets? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is your residence: <input type="checkbox"/> House <input type="checkbox"/> Condo <input type="checkbox"/> Apartment <input type="checkbox"/> Mobile Home <input type="checkbox"/> Duplex <input type="checkbox"/> Other (<i>explain</i>)			
If you live in a Condo or Rent – Does the Association or Landlord have Breed or Size Restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure			
If yes, please explain.			
Do you: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Live w/Parents <input type="checkbox"/> Live w/Friends <input type="checkbox"/> Other (<i>explain</i>)			
If you live with Parents, Friends or Rent – Do you have permission to have a Dog? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you Rent please provide Name & Telephone number of Landlord.			
Landlord Name		Telephone	
How long at current residence?			
If you rent and live at current residence for less than 2 years, list the name and contact info for prior Landlord.			
Landlord Name		Telephone	
Please provide name and contact info for current Landlord.			
Landlord Name		Telephone	
Is your Yard Fenced in? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type and height?			
Does the Fence belong to you? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain.			
Is Fence attached to the House? <input type="checkbox"/> Yes <input type="checkbox"/> No		Any Holes or Gaps in the Fence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If holes or gaps can the dog get out? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If No fence, do you plan to install one? <input type="checkbox"/> Yes <input type="checkbox"/> No (<i>please explain</i>)			
Do you have Tie-Outs? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have Overhead Runs? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Number of Adults in household?		Number of Children in household?	
Please list all members living in household			
Name	Age	Name	Age
Name	Age	Name	Age
Name	Age	Name	Age
REFERENCES			
Please provide names and contact info for two references, not related to or living with you.			
Name of Reference	Address of Reference	Phone Number	Relationship to you
ADDITIONAL INFORMATION			
Please provide any additional information you would like us to know:			
AGREEMENT AND SIGNATURE			
<p>By signing this application I attest that the information provided is true and accurate and understand false information will result in denial of adoption. Also, if an omission or untruth is discovered after an adoption takes place, the City of Attleboro or the Friends of Attleboro Animal Shelter reserves the right to annul the adoption and reclaim the animal. The adoption decision is dependent on many factors, including but not limited to the compatibility of the family to the individual animal. I understand it is the Friends of Attleboro Animal Shelter's prerogative to decide which home is most appropriate and that their decision is final.</p> <p>While FAAS makes every effort to ensure that all animals available for adoption are healthy, it is possible that any animal may have an underlying health issue unknown to FAAS or our veterinarian. All adults have been examined by a veterinarian, received all necessary vaccinations, been combo tested for FIV and Feline Leukemia and spayed or neutered. All kittens have been examined by a veterinarian and have received all age appropriate vaccinations. I hereby agree to hold harmless and to indemnify FAAS, its volunteers, agents and/or veterinarian, for any health issues that may arise after adoption.</p> <p>I, the undersigned, hereby specifically and forever release, discharge and hold harmless the Friends of Attleboro Animal Shelter, its agents, and any other person, firm or corporation charged or chargeable with liability, their heirs, administrators, executors, successors and assigns, from any and all claims, damages, costs, expenses, loss of service, actions and causes of action in relation to adoption of this animal.</p> <p>I hereby authorize the Friends of Attleboro Animal Shelter to receive information from Veterinarians and others listed on this application.</p>			
Signature:			Date:
All Adopted Canines MUST leave the Shelter on a Leash			
<p>If for any reason you or your new canine are unhappy after the adoption, we ask that you wait at least 48 hours before returning the animal. If your canine is having trouble adapting to your home please call us with any questions. If returned within 10 days, you may receive a refund, less \$25.00. After 10 days, the canine will still be accepted back, as space allows, however the adoption fee will not be refunded.</p>			
FAAS USE ONLY			
Date Application Received:		Received By:	
Shelter Name of Canine:		References Done By:	
Approved By:		Denied By:	
Date Adopted:		Receipt # and Amount:	
Medical Records Given:		Medical Records need to be Mailed:	
Microchip:		Adoption Agreement Signed:	
Free Office Visit Given?		Off The Leash Discount Given?	