



The Animal Shelter Society, Inc.  
 1430 Newark Road  
 Zanesville, Ohio 43701  
 Phone 740-452-1077 Fax 740-452-1641  
 E-Mail assi@rrohio.com

**ADOPTION APPLICATION**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ (H) \_\_\_\_\_ (W)

**PLEASE CIRCLE THE CORRECT ANSWER BESIDE EACH QUESTION**

- |   |     |    |
|---|-----|----|
| 1. Do you own your home?  | YES | NO |
| 2. If you rent, do you have written permission from the homeowner to have a pet?  | YES | NO |
| 3. Is the animal being adopted for yourself?  | YES | NO |
| 4. Do you currently own any other pets?<br>If YES, how many _____ what kind _____   | YES | NO |
| 5. Are the pets you currently own spayed or neutered?   | YES | NO |
| 6. Do you have a fenced yard or kennel?<br>If NO, how do you plan to exercise the animal _____  | YES | NO |
| 7. I agree that I will be responsible for proper care of this animal which includes veterinary care, proper diet, grooming and proper exercise.   | YES | NO |
| 8. Do you understand that it will take time for this animal to adjust to your home?   | YES | NO |
| 9. Do you agree to give this animal time to adjust?   | YES | NO |
| 10. Do you have children in your home?<br>If YES, how many _____ Ages _____   | YES | NO |
| 11. Is anyone in the home allergic to animals?  | YES | NO |
| 12. Do you know how to house train an animal?   | YES | NO |
| 13. Would you object to a follow-up visit from a shelter employee?  | YES | NO |
| 14. If you can no longer keep the animal, do you agree to contact the Animal Shelter before giving the pet away?  | YES | NO |
| 15. I am aware that from the time of adoption, I am responsible for any medical care the animal needs and that the Animal Shelter will not be responsible for any medical care or expense should the animal become ill. | YES | NO |

Sign Here: \_\_\_\_\_ Date \_\_\_\_\_



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**Disclosure and Release Clause**

I, \_\_\_\_\_, the undersigned, do hereby declare that I am aware:

1. That animals are different from humans in their responses to human actions.
2. That the actions of animals are often unpredictable.
3. That animals should be closely supervised when they are with children and other pets.
4. That an animal's behavior may change after he/she leaves the shelter and becomes accustom to a new home or other environment.
5. That the Animal Shelter Society, Inc. makes no claims or representations as to the temperament, health, or mental disposition of any animal placed for adoption.

**I hereby accept possession of, title to (subject to conditions in the adoption contract), and responsibility for the animal identified on the adoption agreement and hereby release and discharge the Animal Shelter Society, Inc. forever from liability of any injury or damages to any person or property caused in the future by said animal and from any causes of action, claims, suits, or demands whatsoever that may arise as a result of such injury or damages.**

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**Veterinarian Program**

**Please initial beside each statement**

1. I agree to take my newly adopted pet to a Veterinarian **within 14 days**. \_\_\_\_\_
2. I agree that should my newly adopted pet become ill **within 14 days** of adoption, I will return the pet to the Animal Shelter Society, Inc. for a refund or should I chose to provide veterinary care for the pet it will be at my expense. \_\_\_\_\_
3. Your pet has received the required vaccinations needed up to the day of adoption. Puppies under 3 months of age will not be vaccinated for Rabies. Puppies less than 6 months of age will not be heartworm tested. I agree that it is my responsibility to follow up with my veterinarian for booster vaccinations and a health maintenance program. \_\_\_\_\_

**IT IS IMPORTANT TO ESTABLISH A RELATIONSHIP WITH YOUR LOCAL VETERINARIAN AND WORK OUT A HEALTH MAINTENANCE PLAN.**

**Adopter Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_