



Humane Society of Decatur And Macon County

3373 N. Woodford St., Decatur, IL 62526

(217) 876-0000

Website: hsdmc.org

Facebook: [MaconCountyHumane](https://www.facebook.com/MaconCountyHumane)

ADOPTION APPLICATION

Please print clearly

In order to be considered for an adoption you must: 1) be 21 years of age 2) have the knowledge and consent of all adults living in your household 3) have a valid ID with current address (copy required) 4) understand that completing this application does not guarantee adoption and that the Humane Society of Decatur and Macon County must approve your application.

Which pet are you applying to adopt? _____

Names of all adults in the home _____

Street Address _____

City _____ County _____ State _____ Zip Code _____

Home Phone _____ Work _____ Cell _____

E-mail Address: _____ May we contact you by e-mail? _____

DO YOU: Attend School _____ Work _____ Name of Employer _____ Name of Spouse's Employer _____

DO YOU LIVE IN A: House _____ Apartment _____ Condo _____ Mobile Home _____

DO YOU: Rent _____ Own _____ Live with Parents _____ If you rent, how much? _____

Landlord's Name _____ Address _____ Phone No. _____

Please provide the following information about your household:

Number of Adults _____ Number of Children _____ Ages of Children _____

Do children live in your household full time? _____

If not, how often are children there? _____

Who will be primarily responsible for the care (feeding, grooming, exercise, and training) of your new pet? _____

Why would you like to adopt a pet from us? Please check all that apply. Companion _____ Gift _____

For A Child _____ As a Guard Dog _____ Companion for another pet _____ Other _____

How many pets do you have now: Dogs _____ Cats _____ How many pets have you had in the past? _____

Please list any pets you *now have* or *have had* in the past. If more space is needed, use additional sheet.

<u>Name</u>	<u>Type/Breed</u>	<u>Age</u>	<u>Sex</u>	<u>Altered?</u>	<u>Why you no long have</u>

Have you ever adopted an animal from a shelter? If yes, where? _____ When? _____

Are your current pets up to date on vaccinations and other necessary vet care? _____

Name and phone no. of your current or past veterinarian who would have records of your pets:

Which veterinarian do you plan to use? _____

How much do you anticipate spending yearly on food, vet care, and other expenses? _____

Do any members of your household have allergies? _____ To What? _____

Do you have any plans to move in the near future? _____ If at some time you do move, what will you do with your pet? _____

In case of illness, injury, vacation, etc., who will be responsible for the care of your pet(s) in your absence?

Personal References: (Only one reference may be a relative)

Name: _____ Relationship: _____ Phone No. _____

Name: _____ Relationship: _____ Phone No. _____

If your application is for a dog, please provide the following:

How much time will this dog be alone (without human companionship) _____ hours _____ days a week

Will your dog stay: primarily inside? _____ primarily outside? _____ outside only? _____

Where will the dog be kept when home alone? _____

Where will you exercise this dog? _____ How often? _____

Do you have a *fully* fenced in area? ____ Type of fence? Wood ____ Chain link ____ Other _____

How high? ____ Size _____ Immediate access to fenced in area from exterior door: Yes ____ No ____

When will you use a leash: all the time ____ almost always ____ sometimes ____ never ____

What food will you feed? _____ How often will you groom/brush? _____

Describe how you will housebreak your dog _____

How will you discipline or correct your dog? _____

A dog can live well over 10 years and requires a major commitment of time, finances, and emotion. Why do you feel you can make that kind of commitment at this time? _____

If your application is for a cat, please provide the following:

How much time will this cat be alone (without human companionship) _____ hours _____ days a week

Will your cat be allowed outdoors? _____ How often? _____

Do you plan on declawing your cat? _____ If yes: front feet _____ or all four feet _____

How will you teach you cat to: stay off counters _____

not eat plants _____ not scratch furniture _____

What food will you use? _____ How often will you groom/brush? _____

What will you do if your cat: urinates outside the litter box? _____

How long do you expect it to take for your new cat to adjust to its new home and learn proper behaviors?

A cat can live well over 10 years and requires a major commitment of time, finances, and emotion. Why do you feel you can make that kind of commitment at this time? _____

Any comments you care to add: _____

(3)

This application consists of four (4) pages.

Your application will be processed as quickly as possible. Application process is sometimes delayed due to unavailability of personal references or veterinarian. We will call you with an approval or denial as soon as application is fully processed. It normally takes 1 to 3 business days to fully process application.

By signing below, I certify that the information given is true and correct and I recognize that any misrepresentation of facts will result in my losing the privilege of adopting a pet. I also give my veterinarian permission to release any records and information about my current and past pets to the Humane Society of Decatur and Macon County.

The HSDMC reserves the right to refuse any adoption to anyone for any reason.

Signature _____ Date ____/____/____

Signature _____ Date ____/____/____

Application Approved: _____ Denied _____ Date ____/____/____

Comments: _____