



Hope Marie's Fund Adoption Application

You must be 21 years of age and have a valid driver's license or picture ID to adopt a pet

Pets need veterinary care throughout their lives. Before you adopt a pet, please be sure you have budgeted for food, annual veterinary visits, heartworm prevention, flea and tick prevention, vaccines, and boarding/ grooming fees. Illness, accidents, and unexpected events can occur at any time. Please DO NOT adopt a pet if you cannot provide for ongoing care!

Today's date: _____ Name of pet you are interested in adopting: _____

PERSONAL INFORMATION

First name: _____ Last name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ E-Mail Address: _____

I share my home with _____ Adults _____ Children - Ages of children _____

HOUSEHOLD INFORMATION

Does anyone in the house have any known allergies to dogs or cats? _____

Do you own or rent your home? _____

If renting, please list landlord information below as we need this to verify that you are allowed to have a pet.

Name of Landlord: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

How long have you lived at the current residence? _____

Do you have a fenced yard? _____ If so, how high? _____ What type? _____

Do you plan to move in the next few years? _____

Do you plan to find suitable housing that allows you to keep the pet? _____

CURRENT PETS

Current pets in the household:

of indoor dogs: _____ # of outdoor dogs: _____ # of indoor cats: _____ # of outdoor cats: _____

Other: _____

Are the other pets in the household spayed/neutered? _____

If no, why not? _____

Are the other pets on heartworm prevention? _____

If no, why not? _____

If you have cats, are they tested for feline leukemia? _____

If no, why not? _____

HISTORY

Have you owned a pet before? _____

What happened to your last pet? (i.e., surrendered, died, gave away, etc.) _____

Have you ever surrendered a pet? _____ If so, please explain the circumstances/reasons. _____

RESPONSIBILITY

Where will the pet stay when you are not at home (i.e. crate, garage, house, etc.)? _____

Where will he/she sleep? _____

What do you estimate, as the cost of veterinary care and feeding, etc. for this pet for one year? _____

Who will be in charge of caring for the pet? _____

Why do you want this particular pet? (i.e., feel sorry for it, too cute to leave behind. companionship, teach kids responsibility, breeding, etc.) _____

Please list your veterinarian: Name: _____ Phone: _____

How long have you been associated with this doctor / hospital? _____

Please list an additional reference of a non-family member:

Name: _____ Address: _____

Phone: _____ E-mail: _____

The Adoption Fee for dogs is \$250. The Adoption Fee for cats is \$100.

This fee includes all current vaccinations, microchip, fecal, heartworm and feline leukemia/ immunodeficiency viral testing as appropriate, and the pet is spayed or neutered. The fee also includes two months worth of Heartworm prevention.

If the pet is too young for the spay/neuter surgery or completed vaccine series, it may still be released into your care but would need to be returned for completion of the vaccines or surgery.

We check references and a home visit is required to complete the adoption.

By signing below, you are indicating that the information provided in this application is accurate and true and agree to allow us to request a release of veterinary information on current and past pets and authorize the veterinarian or his/her representative to discuss the care you provide for your pets with a member of Hope Marie's Fund rescue.

Print name: _____ Date: _____

Signature: _____

This application may be returned to:

MAIL:

Hope Marie's Fund
c/o Bargersville Veterinary Hospital
4253 N. State Rd. 135 Franklin, IN 46131

FAX:

317-422-9563

EMAIL:

[hopemariesfund@gmail.com](mailto:hopenariesfund@gmail.com)