



525 Post Oak Road • Madison, MS 39110 • 601-605-4729

ADOPTION APPLICATION

Please fill out the application completely and legibly. Incomplete applications will not be considered. **The person applying must be 21 years of age or older.** A valid ID may be required for adoption. The Webster may refuse adoption to anyone for any reason.

Pet Interested in : _____ Today's Date: _____

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

DL Number (and State DL was issued): _____

Place of Employment: _____

Occupation: _____ Work Phone #: _____

Name of Spouse/Partner/Roommate: _____

Place of Employment: _____

Occupation: _____ Work Phone #: _____

Cell Phone #: _____ Age: _____

Do you have children? (Y/N) _____ Ages: _____

Do your children live with you? (Y/N) _____

Have they ever been around: Dogs? (Y/N) _____ Cats? (Y/N) _____

Reason for adopting: _____

Concerns about adopting: _____

Who will be primarily responsible for the pet's care? _____

How did you hear about the Webster Shelter? _____

HOME INFORMATION

Type of Dwelling: (Circle one): House (neighborhood) Mobile Home
 House (with acreage) Apartment/Condo

Years at current residence: _____ Do you own or rent? _____

Do you have a yard? (Y/N) _____

Do you have a fence? (Y/N) _____ If Yes, Height: _____ Type: _____

Describe how your pet will be housed/confined:

Where will your pet sleep? _____

Where will your pet NOT be allowed? _____

GENERAL QUESTIONS

How many hours a day will your pet be left alone? _____

What will you do with your pet while you are at work?

How do you plan to housetrain your dog?

Where will your cat's litter box be located? _____

Under what conditions would you NOT keep your new pet?

Do you travel frequently? (Y/N) _____ Will your pet go with you? (Y/N): _____

How will your pet be cared for while you are out of town?

Briefly describe your lifestyle: _____

Have you ever euthanized a pet? (Y/N) _____

If so, under what circumstance? _____

Do you have a friend/relative who would care for your pet if you became incapable of caring for them for an extended period of time? (Y/N) _____

Name: _____

Address: _____

Contact Numbers(s): _____

PET INFORMATION

Current Veterinarian:

Name: _____

Address: _____

Phone Number: _____

Current number of pets in your household: Dogs _____ Cats _____ Other _____

When were their last physical examinations and vaccinations?

What type of heartworm preventive are they on? _____

Pets you have owned (Past 10 years and present):

Pet Type	Breed	Age	Sex	Spayed/ Neutered?	Still Own?	Reason for no longer owning

What are your pet's names? _____

May the Webster Animal Shelter contact your veterinarian? (Y/N) _____

References

Name: _____ **Contact Phone #:** _____

Relationship: _____

Name: _____ **Contact Phone #:** _____

Relationship: _____

Please read and initial:

I understand that pet ownership is a commitment for life, and bringing a pet into the family means he/she will be treated like a family member. _____

I understand that pets cost money and must see a veterinarian at least yearly and be on heartworm preventive monthly. _____

I understand that my pet must be spayed or neutered by 6 months of age. _____

I understand that adoption may require a home check and/or delivery of the pet. I consent to this in the event my application is approved. _____

I understand that I **MUST** return my pet to the Webster Animal Shelter should I not be able to keep him/her. _____

Print Name: _____

Signature: _____

Date: _____

City of Madison Webster Animal Shelter

525 Post Oak Road • Madison, MS 39110

(601) 605-4729

Adoption Contract

It is the mission of the Madison Webster Animal Shelter to promote the humane treatment of all animals. Our shelter gives haven to as many rescued animals as our resources allow. It is our goal to find permanent loving homes for the animals in our care. An adoption fee is charged to cover a portion of the medical and care-giving expenses incurred with each rescue. These expenses include examinations, vaccinations and spay/neuter.

The adoption of any animal placed by the Madison Webster Animal Shelter is a contract between our organization and the adoptive individual. This agreement means the adoptive guardian of any animal placed by the Madison Webster Animal Shelter understands and agrees to meet the conditions set in this contract. The Madison Webster Animal Shelter reserves the right to set our standards of care for the animals we place. The Madison Webster Animal Shelter reserves the right to reclaim any animal that is not cared for by the terms of our contract.

The intent of this introduction to our contract is to give a clear understanding of its binding terms and our desire to establish a loving, lasting bond between our rescued friends and their new families.

PLEASE READ AND INITIAL:

1. The adoption is a transfer of guardianship, and the animal adopted shall not be sold, leased, loaned, bred, or used in any manner for financial gain, or for any other reason other than companionship. _____
2. Any animal adopted from the Madison Webster Animal Shelter must be returned to the Madison Webster Animal Shelter if the adoptive person cannot, or chooses not to, meet the terms of this contract, or through unforeseen causes is unwilling or unable to continue their guardianship. Adoption fees are **NONREFUNDABLE**. _____
3. Any adopted animal may be removed from the home if any of the terms of this contract are not being met. _____
4. An application will be reviewed for all adoptions. An application may be denied for any reason. _____
5. Any animal adopted from the Madison Webster Animal Shelter must be spayed or neutered by 6 months of age. Part of the adoption fees covers the surgery. _____
6. Any animal adopted from the Madison Webster Animal Shelter must be taken to a veterinarian within 7 days for examination to set up wellness plans (schedule for vaccinations, testing, medical treatment, physical exams, heartworm preventive, etc.) _____
7. I agree to be personally responsible for the humane care and treatment of this animal, including proper food, water, shelter, and veterinary care. _____
8. I agree to keep this animal (dog) in a fenced yard, or on a leash outside if housed indoors. I agree to keep this animal out of harm's way and from being a nuisance to my neighbors. _____

CONTINUE TO NEXT PAGE

- 9. I agree to notify the Madison Webster Animal Shelter as soon as possible if this animal becomes lost or stolen. _____
- 10. The actions of animals are often unpredictable and their behavior may change after leaving the shelter. Children should be closely supervised with a new animal. I understand that the Madison Webster Animal Shelter cannot be responsible for the future temperament, mental disposition, and the health of the adopted animal. _____

I hereby accept possession of, title to, and responsibility for the animal identified below and hereby release and discharge the Madison Webster Animal Shelter and its representatives, forever from liability for any injury or damages to any person or property caused in the future by said animal, and from any causes, suits, or demands, whatsoever that may arise as a result of such damages.

Signature: _____ Date: _____

Adopter

Name: (please print legibly) _____

Address: _____

Home Phone Number: _____

Work Phone Number: _____

Cell Phone Number: _____

STOP HERE – BELOW FOR OFFICE STAFF ONLY

Adoptee

Name: _____ Dog
 Cat

Breed: _____ Color/Markings: _____

Adoption Fee

\$100 Dog/Puppy \$75 Kitten \$25 Cat

Method of payment: Circle One: CASH OR CHECK **NO CREDIT CARDS**

Check Number: _____

Madison Webster Animal Shelter Witness:

Date: _____