



Bastrop County Animal Shelter Adoption Application



ATTENTION STAFF, VOLUNTEERS, FOSTER PARENTS, AND ADOPTERS:

*****In order to process and complete your adoption, THIS BOX MUST BE FILED OUT*****

Animal Pet ID # _____ (can be obtained through shelter)

Employee Initials _____ Approved: YES or NO if no, why not?

Foster Parent: Please fill out below if you completed the screening and approved the adoption
Signature: _____ Printed Name: _____ Date: _____

Thank you for choosing to adopt a pet! We have an obligation to ensure that the animals left in our care are placed into responsible, **forever** homes

Today's Date: _____

Name of Animal you are interested in adopting: _____

POTENTIAL ADOPTER INFORMATION:

Name: _____	Home Phone: _____
Address: _____	Work Phone: _____
City and zip code: _____	Cell Phone: _____
County: _____	Email: _____

Are all adults in the household in agreement to adopt a pet? Yes No

Who is your employer? _____

I am 18 years or older Yes No

Do you rent or own your home? Rent Own

- If renting, do you have permission from landlord to own a pet? Yes No

- If yes, provide landlord contact info: _____

How many children live in the household? _____

- Ages? _____

Are you adopting this animal as a gift? Yes No

DOGS

Will this be an inside or outside pet? _____
 What kind of outside shelter will you provide for your pet when it is outside? _____
 Will you chain this dog? _____
 Are you adopting a dog for a guard dog? _____

CATS

Will this cat be inside or outside? _____
 Do you plan to de-claw this cat? _____
 Will this cat be kept as a barn cat? _____

Do you have a fenced yard? Yes No

- How tall is your fence? _____

Is your fenced yard completely enclosed? Yes No

_____ I understand that a shelter employee may visit my property to ensure fence is enclosed and big enough for the size dog.

_____ I understand the dog I adopt may need training/house broken etc. We expect you to work with the animal before returning it back.

How many pets do you have at home? _____

	<u>Pet's Name</u>	<u>Breed</u>	<u>Age</u>	<u>M/F</u>	<u>Spayed/Neutered</u>	<u>How long have you owned this pet?</u>
1.	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
2.	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
3.	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
4.	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
5.	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Does your current pet(s) live inside or outside? _____

The Vet that sees and vaccinates my pet(s) is: _____ Phone: _____

List pet(s) you have owned in the last 5 years and their status:

When you are away from your home for an extended time, where does your pet(s) stay?

On an average work day how many hours will your pet(s) be alone? _____

If you move what will happen to this animal? _____

_____ I am aware and agree that, if I can no longer care for this animal I cannot sell it to anyone but, if I give the pet away, I must contact the Bastrop Animal Shelter to change ownership.

_____ I understand that all animals adopted from BCAS will be spayed/neutered. We do not adopt out animals for breeding.

_____ I understand that pets can live 15 years or longer and can cost up to \$500 each year for basic nutrition and vet care. I am willing to accept this financial responsibility.

Signature / Date

Printed Name