



**ANIMAL OUTREACH
OF CAPE MAY COUNTY**
RESCUE YOUR BEST FRIEND

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DOG ADOPTION APPLICATION

Today's Date:		
Applying to Adopt (dog's name):		
Your Name:		
Address (City, State, Zip):		
Phone:	Home:	Cell:
Email Address:		

Do you live in a: ☐ house ☐ apartment ☐ mobile home ☐ condo ☐ dormitory

Do you: ☐ rent ☐ own ☐ live with parents

If you rent, we require written permission from the landlord/homeowner stating that you are allowed to own a pet.

Landlord name: _____ Landlord Phone: _____

Is there anyone home during the day? ☐ Yes ☐ No Hours at home _____

How long have you resided in your present location? _____

Should you have to move for any reason (locally, out of state, or overseas) will you keep your pet(s) with you? ☐ Yes ☐ No

What kind of plan do you have for your pet(s) if you move and aren't willing to keep them with you?

Did any of your pet(s) ever get lost? ☐ Yes ☐ No

If yes, please explain: _____

Do you have children? If yes, what are their ages? _____

How many people live in your house? _____

Have you owned a pet in the last 5 years? ☐ Yes ☐ No
 If yes: Number of cats: _____ Number of dogs: _____

Have you adopted from us in the past? ☐ Yes ☐ No
 If yes, when? _____

PETS - Please list pets you now have in your home.

Pet's Name	Cat or Dog (circle one)	Sex	Spayed or Neutered?	Age	How long have you had this pet?	Up to date on vaccinations?
	Cat Dog	M F	Yes No			Yes No
	Cat Dog	M F	Yes No			Yes No
	Cat Dog	M F	Yes No			Yes No

PREVIOUSLY OWNED PETS - Please list pets you have owned in the last 5 years.

Pet's Name	Cat or Dog (circle one)	Sex	Spayed or Neutered?	Age	Dates Owned	Why do you no longer have this pet?
	Cat Dog	M F	Yes No			
	Cat Dog	M F	Yes No			
	Cat Dog	M F	Yes No			

If your current pet(s) or previously owned pet(s) were not spayed or neutered, please explain:

Name of your current or previous veterinarian: _____ Phone: _____
 (Please initial here to give Animal Outreach permission to contact your current or previous
 veterinarian: _____)

When was your current pet(s)' last visit to the vet and why? _____

Why do you want to adopt a dog now?

☐ Companionship for myself ☐ Companion for family member ☐ Companion for another pet
☐ Companion for child ☐ Gift for someone ☐ Other: _____

Where will your dog spend most of its time? _____

If you work during the day and your dog will have to remain home, what is your plan for the dog?
 (Please describe the area in which the dog will be kept and how many hours the dog will have to stay
 alone.)

What will you do if your dog chews/claws furniture or shows destructive behavior?

Do you plan to leave your dog unattended in the yard? ☐ Yes ☐ No

If yes, please explain: _____

Are there any known allergies that would prevent a dog from living with you?

☐ Yes ☐ No

Are you financially prepared to give this dog routine and, if necessary, emergency medical care?

☐ Yes ☐ No

Would you be willing to allow follow-up visits and/or calls from us to see how you and your new family member are doing? ☐ Yes ☐ No

If you answered "No," please explain: _____

Are you ready and willing to make the long-term commitment to owning a dog?

☐ Yes ☐ No

REFERENCES - Please provide three.

Name	Phone Number	Relationship to You

* * * * *

ADDITIONAL INFORMATION/REQUIREMENTS:

- *Adopter must be at least 21 years of age to adopt an animal.*
- *Adopter must provide a valid driver's license or another form of ID.*
- *Adoption applications will be reviewed and processed when this application has been filled out entirely and the above information has been supplied and confirmed.*
- *All applications will be reviewed by the Adoption Coordinator. This sometimes takes several days, and the Adoption Coordinator will contact you when a decision has been reached.*
- *Submitting an application does not guarantee adoption. Animal Outreach carefully screens all adoption applicants, and all applications are reviewed by our Adoption Committee to determine the best fit for the animal. Animal Outreach reserves the right to refuse any adoption, and the foster home (if applicable) has a say in all adoptions.*
- *Animal Outreach reserves the right to do a home check at any point after the adoption.*

- *All currently and recently owned cats/dogs must be spayed or neutered, and we verify this when we call your veterinarian's office.*

By signing this form and the attached Adoption Contract, I certify that the information I have given is true. I recognize that any misrepresentation of the facts may result in my losing the privilege of adopting a dog. I authorize investigation of all statements on this application.

Signature

Date



Dog Adoption Contract

I, _____ (*printed name*), adopt this animal and give up any claims for personal injury and/or property damage to myself or anyone or anything associated with this adoption. I agree to all of the following statements:

1. The welfare of this animal is solely mine.
2. I am adopting this animal for myself and/or my family. I am not adopting this animal for another person or any other agency.
3. This animal will not be used for breeding, medical, or experimental purposes.
4. I agree that if I give false information or do not comply with the terms of this contract, the animal will be removed from my premises and legal proceedings will be brought against me.
5. I agree to provide any medical care this animal needs now or will need in the future including routine/annual inoculations and exams. I agree to keep this animal on heartworm preventative treatment. I agree to have this animal tested under the advice of my veterinarian.
6. I agree to contact Animal Outreach immediately if this animal becomes lost. I understand that in Cape May County, Animal Control policies are in transition and losing an animal may mean the life of the animal.
7. I will keep an I.D. tag on this animal at all times.
8. I will never abandon or sell this animal and will never give it up to a shelter or to another person. If circumstances demand that the animal no longer can live with me, I will call Animal Outreach to provide enough time to arrange for re-adoption or foster care.
9. I agree to a home visit and follow-up visits. I understand that if conditions warrant it, the animal may be removed from my premises and this adoption will be voided.
10. I will not hold Animal Outreach responsible for errors in any information provided to me about this animal.
11. I understand the adoption fee includes first shots, spay/neuter of the animal, and a first visit to a participating veterinarian in the area. (If the animal goes home before it is spayed or neutered, please sign the Addendum to Adoption Agreement - Sterilization).
12. I accept all responsibility and liability for this animal as of the date of adoption.

Date

Animal's Name

Adopter's Signature

Internal Use Only

Adoption Counselor: _____ Follow-up Calls: _____
Home Visit Completed (Date): _____ Notes: _____