A No-Kill Animal Shelter

# Adoption Inquiry 

Macoupin County Adopt-A-Pet
a.k.a. Benld Adopt-A-Pet

P O Box 53-807 Stewart Rd - Benld IL 62009
Phone 217.835.2538-Fax 217.835.2537

This form is to determine if the proposed adoption is in the best interest of both the pet and your family.
Several inquiries for adoption may be taken on an animal and all inquiries are subject to approval by shelter staff.
What types of pets are you interested in adopting - Check all that apply: (Please Print)
KittenDog Puppy Animal's Name (if known) $\qquad$
Breed $\qquad$ Sex: $\square$ Male $\square$ Female $\square$ Either Age (approximate) $\qquad$
Color $\qquad$ House-trained: $\square$ Yes $\square$ No Crate or Litter Trained: $\qquad$ If looking for a dog or puppy, what type: $\square$ Companion $\square$ Hunter $\square$ Guard $\square$ Couch Potato If dog or puppy, maximum size when fully grown: $\square$ Small $\quad$ Medium $\quad \square$ Large $\quad \square$ Very Large

## Household Information:

Number of adults (including yourself) over age 21 residing in household $\qquad$ Ages Number of children under age 21 residing in household $\qquad$ Ages $\qquad$ Is anyone in household allergic to dogs or cats: $\square$ Yes $\square$ No If yes, who? $\qquad$ Is anyone in household physically challenged: $\square$ Yes $\square$ No If yes, explain: $\qquad$ Do you live in: $\square$ House $\square$ Apartment $\square$ Condo $\square$ Duplex $\square$ Mobile Home $\square$ Townhouse Do you: $\square$ Own $\quad \square$ Rent $\square$ Lease How long have you been at this address? $\qquad$ If you rent, what is Landlord's: Name $\qquad$ Phone $\qquad$
(If renting or leasing, we will contact your landlord to verify that having pets in your home is acceptable.)
Are you employed? $\square$ Yes $\square$ No If yes, where? $\qquad$ Name of supervisor $\qquad$ Work Phone Name of your veterinarian $\qquad$ Phone $\qquad$
Name on your veterinary account $\qquad$ Phone $\qquad$
List all pets that reside at your address: (Use separate sheet of paper if you require additional space.)
(We recommend all other animals in your home be altered and up to date on vaccinations.)

| Name | Breed(s) | Age | Dog or Cat | Male/ Female | Spayed/ <br> Neutered | Vaccines Current | How Long Owned |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | Dog / Cat | $\mathrm{M} / \mathrm{F}$ | Yes / No | Yes / No |  |
|  |  |  | Dog / Cat | $\mathrm{M} / \mathrm{F}$ | Yes / No | Yes / No |  |
|  |  |  | Dog / Cat | $\mathrm{M} / \mathrm{F}$ | Yes / No | Yes / No |  |
|  |  |  | Dog / Cat | $\mathrm{M} / \mathrm{F}$ | Yes / No | Yes / No |  |
|  |  |  | Dog / Cat | $\mathrm{M} / \mathrm{F}$ | Yes / No | Yes / No |  |
|  |  |  | Dog / Cat | $\mathrm{M} / \mathrm{F}$ | Yes / No | Yes / No |  |

Do your dogs/cats get along with other dogs/cats?Yes
$\square$ NoUnknown Are any of your dogs food aggressive: $\square$ Yes $\quad$ No $\quad \square$ Unknown Do you have a securely fenced yard: $\square$ Yes $\square$ No Type of fence: $\qquad$ Height of fence: $\qquad$ (All dogs and puppies must be supervised at all times when outdoors. Cats and kittens must be kept indoors at all times.)

If no fenced in yard, how will you control your dog when outside? $\qquad$

On an average day, how many hours will the animal(s) be alone? $\qquad$
Where will the animal(s) be kept when someone is home? $\qquad$
Where will the animal(s) be kept when someone is not home? $\qquad$
Where will the animal(s) sleep at night?
How would you describe your level of experience with dogs/cats? (Check all that apply)
$\square$ Never had a $\square$ dog $\square$ cat
$\square$ Had childhood pet $\square$ dog $\square$ cat
$\square$ Had one or more as an adult
$\square$ Have experience with X-large or bully breeds
$\square$ Have experience working with behavioral problems with a personal $\square \operatorname{dog} \square$ cat
Have you owned a pet previously? $\square$ Yes $\square$ No If yes, what happened to it/them? $\qquad$

Have you ever been investigated by Animal Control or had a pet impounded? $\quad$ Yes $\square$ No If yes, explain: $\qquad$

Have you ever had an application to adopt a cat or dog denied? $\square$ Yes $\square$ No
If yes, when and by what agency? Date $\qquad$ Agency $\qquad$
Reason for denial $\qquad$

Please tell us anything else about yourself that might help us match you up with the right animal:
$\qquad$
$\qquad$

Personal Information: (Please Print)


