

ALOHA RESCUE NFP
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ADOPTION APPLICATION

MUST BE FILLED OUT COMPLETELY

Name: (Head of household) _____
Address: _____ City _____ State/zip _____
Home Phone: _____ Cell Phone _____
Occupation: _____ Full/pt Work phone _____
How long at present address: _____ Own/rent _____
If you rent, or have an association, do they allow pets and/or do they ban certain breeds such as pit bulls? _____
E-mail address: _____
Animal you want to adopt: dog/cat male/female neutered/spayed breed _____

FAMILY DATA

Marital status: _____
Spouse/co-applicants name: _____
Occupation: _____ Full/pt Work phone _____
Does spouse/co-applicant support getting a pet? Yes/no
Do you have children? Yes/no What are there ages? _____
Have you had a pet before? Yes/no Where is that pet now? _____
Do you have a pet now? Yes/no, What kind of pet is it? _____
Pets name/names: _____
Spayed/neutered Yes/no
Are all your pets current on vaccines and preventative care? Yes/no If not, please explain _____
Does anyone in your family have breathing problems or allergies? _____
Will the pet be home alone during the day? Yes/no How long? _____
Where will the pet be kept during the day? Crate/enclosed area
Please explain _____
Where will the pet be at night? _____
Do you have a fenced in yard? Yes/no type and height _____
Do you plan to crate train or paper train this puppy? _____
Your Vet's name: _____ Phone: _____
Have you ever raised a puppy before? Yes/no
Are you committed to caring for this pet for its lifetime regardless of accident or illness? Yes/no
Do you object to a rescue volunteer visiting your home by appointment? Yes/no

(1)

(2)

If your pet develops a behavior problem, would you be willing to consult with a professional trainer? _____
Under what circumstances would you return your pet?

How do you plan to discipline your pet?

Please give the name, phone, and relationship of three references that we may contact and the best time to reach them.

REFERENCES

Contact 1

Name: _____
Address: _____
Phone: _____
Relationship _____
Best time to call _____

Contact 2

Name: _____
Address: _____
Phone: _____
Relationship _____
Best time to call _____

Contact 3

Name: _____
Address: _____
Phone: _____
Relationship _____
Best time to call _____

(3)

I certify that all statements made by me in this application are true. I also agree that Aloha rescue has the right to deny my application and keep any fees that were paid if any statement made by me are found to be false. All village and city pet restrictions will be verified before adoption is finalized.

Signature _____ Date _____