Adoption Application

By checking “I Agree,” I understand I am considered a potential adopter. The potential adopter and any/all individuals present with the potential adopter recognizes and understands the inherent risk associated with the interaction and care of animals. These risks include but are not limited to the possibility of any injury to person and/or property, including your existing pets. In consideration of this assumption of risk, the potential adopter and any/all individuals present with the potential adopter hereby knowingly and willingly waive any and all claims, damages, or causes of action and will not hold Finding Forever Animal Rescue, its volunteers, officers, or employees liable.

[ ]  Agree [ ]  Disagree

Name:Click here to enter text. Spouse:Click here to enter text.

Address:Click here to enter text. City:Click here to enter text. Zip Code:Click here to enter text.

Phone (cell): Click here to enter text. Phone (work):Click here to enter text.

Email: Click here to enter text. Driver’s License Number:Click here to enter text.

Do you…[ ] Rent [ ] Own [ ] Other :Click here to enter text.

Landlord’s Name :Click here to enter text. Phone Number: Click here to enter text.

Who lives in your household # of Adults: Click here to enter text. # of Children: Click here to enter text.

Does anyone in your household have allergies to animals? [ ] Yes [ ] No

If yes, please describe: Click here to enter text.

Have you ever had a pet? [ ] Yes [ ] No

If yes, what happened to the pet? Click here to enter text.

Is this pet for you?[ ] Yes [ ] No

Have you ever given a pet away or relinquished a pet to a shelter? [ ]  Yes [ ]  No

If yes please explain: Click here to enter text.

Where do you plan on housing the pets?

[ ] Indoor [ ]  Outdoor [ ]  Both indoor/outdoor

Do you plan to declaw this cat? (please circle one)

[ ]  Yes [ ]  No [ ]  Undecided

List any and all animals that you’ve owned in the past 5 years, including ones you currently own:

Type/Breed Age Sex Spayed/Neutered Still Own?

Click here to enter text.

Veterinary Name and Phone #: Click here to enter text.

I give permission for FFAR to contact both my veterinarian and landlord. I certify that all statements made by me on this adoption agreement are true and correct.

Click here to enter text. DATE: Click here to enter a date.

ADOPTER’S SIGNATURE

Click here to enter text. DATE: Click here to enter a date.

WITNESS SIGNATURE