

Animal's Name: _____	Animal's Number: _____	SPCA Tag #: _____
Breed: _____	Sex: _____	Age: _____
		Other: _____

Waiting List

The SPCA of Anne Arundel County

Adoption Application for a Small Animal

(Applicants must be 18 or older)



Applicant's Name		Age	Home phone	
Co-Applicant's Name		Age	Home phone	
Applicant's cell phone (optional)		Co-Applicant's cell phone (optional)		
Applicant's email		Co-Applicant's email		
Relationship: <input type="checkbox"/> Spouse <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Roommate <input type="checkbox"/> Significant other <input type="checkbox"/> Other _____				
Address		City	State	Zip
County <input type="checkbox"/> Anne Arundel <input type="checkbox"/> Other _____		Mailing address (if different from above):		
Are you moving/being deployed soon? Yes No	If yes, when?	If you had to move what would you do with this animal?	How long have you lived at your current address?	
Do you: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Live with relatives		If with relatives, who is the homeowner?		
Do you live in a: <input type="checkbox"/> House <input type="checkbox"/> Townhouse <input type="checkbox"/> Apartment <input type="checkbox"/> Condo <input type="checkbox"/> Mobile home <input type="checkbox"/> Boat				
Landlord/Complex name		Phone number	Best time to call?	
Applicant's Employer	Work phone	Co-Applicant's Employer	Work phone	
If unemployed, please list your source of income and monthly amount:				
How many adults live in the household?		How many children live in the household? (please include children's ages)		
Please list the adults residing in the household (other than applicant and co-applicant) and their relationship to you.				
1. _____		Relationship: _____		
2. _____		Relationship: _____		
3. _____		Relationship: _____		
Does any member of your household suffer from allergies or asthma related to animals? Yes No		If yes, who and to what kind of animals?		
Why do you wish to adopt this animal? (check all that apply)				
<input type="checkbox"/> Companion <input type="checkbox"/> Gift <input type="checkbox"/> To breed <input type="checkbox"/> For my other pet <input type="checkbox"/> For child <input type="checkbox"/> Other: _____				
Who are you adopting this animal for?			How much money do you expect to spend on this pet each year?	
<input type="checkbox"/> Yourself <input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Pet <input type="checkbox"/> Child <input type="checkbox"/> Significant other <input type="checkbox"/> Other _____			<input type="checkbox"/> \$50 - \$100 <input type="checkbox"/> \$100 - \$200 <input type="checkbox"/> \$300 - \$400 <input type="checkbox"/> \$400 - \$500	
Who will be responsible for the primary care of this animal?				
This animal will be: <input type="checkbox"/> Indoors only <input type="checkbox"/> In/Out <input type="checkbox"/> Outdoors only <input type="checkbox"/> Don't know yet				

Are you willing to take responsibility for this animal for the next 3-15 years? Yes No	If No, why not?
Have you ever owned this type of small animal before? Yes No	If yes, when?
What attracted you to this animal?	What do you consider a good/valid reason for <u>you</u> to give up this animal?
What do you plan on doing with this animal while you are on vacation?	What do you think are the most important responsibilities of owning an animal?
Have you ever adopted an animal from <u>any</u> shelter in the past? Yes No	If yes, when?
Have you ever brought an animal, other than a stray, to The SPCA of Anne Arundel County or any other shelter in the past? Yes No	If yes, please explain (be specific as to when, which shelter, and why)

Please list the pets you currently own, any other pets in the home, and any pets you have owned within the past 10 years (if you need additional room please write on back).

Pet's name	Type of animal	Sex	Spayed or neutered	Age	Kept indoors or outdoors	Where is it now?
		M F	Yes No		In Out Both	
		M F	Yes No		In Out Both	
		M F	Yes No		In Out Both	
		M F	Yes No		In Out Both	

Current Veterinary Hospital name	Veterinary Hospital phone
Name records are listed under	Pet's names

What brought you to The SPCA of Anne Arundel County?

<input type="checkbox"/> Our website	<input type="checkbox"/> The Capital Newspaper	<input type="checkbox"/> SPCA Event/Mobile Unit
<input type="checkbox"/> The Pennysaver	<input type="checkbox"/> Driving by	<input type="checkbox"/> The radio (WRNR 103.1 FM)
<input type="checkbox"/> My veterinarian referred me, which one? _____	<input type="checkbox"/> Word of mouth, who? _____	<input type="checkbox"/> Rescue referred me, which one? _____
<input type="checkbox"/> Another shelter referred me, which one? _____	<input type="checkbox"/> Comcast On Demand	<input type="checkbox"/> Other _____

Unanswered questions, incomplete answers, illegible answers, or false information will cause this application to be rejected. The SPCA of Anne Arundel County, Inc. reserves the right to decline adoption applications.

I/We give permission for The SPCA of Anne Arundel County, Inc. and/or the SPCA's authorized agents to verify the information, including the release of medical information pertaining to my pet(s) from the veterinarian(s) provided in the application. I/We certify that the aforementioned information is true and correct to the best of my/our knowledge.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____