

Medina County SPCA
245 S. Medina Street
Medina, Ohio 44256
330-723-7722 Box #7



ADOPTION APPLICATION

Welcome to The Medina County SPCA adoption program! We are glad you have come to adopt a pet from our organization.

What kind of pet are you interested in adopting?

Dog Puppy Cat Kitten Other (Please Specify) _____

Do you have a specific animal in mind? yes no

What is this animal's name? _____

The following information is requested so that your adoption counselor can assist you in the selection of a new pet. The animal's welfare is our foremost consideration. The consultation process is designed to help us determine if the adoption is in the animal's best interest and to assist you in finding an animal most compatible with your lifestyle.

The animals available for adoption come here from a variety of sources. All animals are examined by a veterinarian and routinely monitored while in our care, but there is always a chance that an animal is incubating a disease without showing any clinical signs.

Our adoption fee includes: spay/neuter, routine vaccines, heartworm testing (dogs), FIV-leukemia testing (cats).

IN ORDER TO COMPLETE THE APPLICATION YOU MUST:

- Be 18 years of age or older;
- Have identification showing your present address;
- Have the knowledge and consent of your landlord (including adult children living with parents);
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet.**

NAME: _____ Date: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ WORK PHONE: _____

PLACE OF EMPLOYMENT: _____

EMAIL ADDRESS: _____

The Medina County SPCA reserves the right to refuse adoption to anyone. No animal will be adopted to person(s) having an extensive history of losing, giving away, selling or having animals injured or killed by moving vehicles. No animal will be adopted to prospective owners who mislead or fail to provide accurate information on the adoption application.

PLEASE FILL OUT THE FOLLOWING QUESTIONNAIRE. UPON COMPLETION IT WILL BE REVIEWED BY ONE OF OUR ADOPTION COUNSELORS.

1. Why do you want to adopt a pet? _____

2. Is this your first experience owning a pet? Yes No

3. What pets do you currently have in your household?

Name: _____ Dog Cat Spayed/Neutered Yes No Age: _____
Kept where: In Out Current on vaccinations: Yes No

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Name: _____ Dog Cat Spayed/Neutered Yes No Age: _____
Kept where: In Out Current on vaccinations: Yes No

4. List pets owned in the last five years other than those listed above and where are they now: _____

5. Who is your veterinarian? _____ Phone: _____

I agree to release any veterinary records to the Medina County SPCA for the purpose of this adoption. _____ (Initials)

6. Do you currently live in a House Apartment Condo Mobile Home Duplex

7. Do you Own Rent

8. If you rent, does your lease allow pets? Yes No

If yes, please provide lease agreement or a number where your landlord can be reached to confirm you are allowed to have pets. _____

9. How long have you lived at the above address? _____

10. How many people live in your household? _____

Do all the adults know you plan to adopt? Yes No

If there are children in the household, what are their ages? _____

11. Do you or anyone in the household have any allergies to animal? Yes No
If yes, what kind? _____
12. Who will be the primary caregiver of this animal? _____
13. Where will the pet be kept during the day? _____ Night _____
14. How many hours will it spend without human companionship? _____
15. Please list one personal reference (not related to you) and their phone number:

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16. Who will care for your pet during vacations? _____
17. What will you do if your dog/cat chews/claws the furniture or shows other destructive behaviors? _____

DOG ADOPTIONS ONLY

- A. Do you have a fenced in yard? Yes No If yes, how high? _____
If no, how will you confine the dog to your property? _____
- B. Are you prepared to housetrain your new dog or puppy? Yes No
- C. Are you familiar with leash and licensing laws in your community? Yes No
- D. Are you familiar with crating? Yes No
How do you feel about crating? _____
Are you planning on crating your new dog or puppy? Yes No
- E. Do you plan on taking your dog to obedience training? Yes No
- F. Are you familiar with heartworm disease? Yes No

CAT ADOPTIONS ONLY

- A. Will this cat be allowed outdoors? Yes No
- B. Do you plan on having your kitten/cat declawed? Yes No

Signature: _____ Date: _____

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE. THANK YOU!

Residence Check (Driver's License) _____

Current Address? Yes____ No____

Landlord Approval _____ Copy Attached _____

Veterinary Reference _____

Personal Reference _____

Reviewed:

Animals Personality _____

Home Situation _____

Adjustment period _____

Feeding _____

Length of time alone _____

Confinement _____

Housebreaking _____

Vet Care _____

Training _____

Exercise _____

Additional Comments

Adoption Counselor _____

Approved _____

Denied _____ Reason _____