



Adopter Application Form

Home and Family Information		
Name of Applicant (and Spouse, if applicable)		
Date of Birth for Applicant	Date of Birth for Spouse	
Physical Address		Phone Number
City, State, Zip		Cell Phone Number
How long at this address?	Email Address	
Circle One : Rent or Own?	Circle One: House/Mobile Home Apartment Condo	
Does your landlord allow pets?	Landlord's Name	Landlord's Phone Number
If you rent your home, please attach a letter from your landlord stating that animals are allowed and what restrictions exist, if any. We cannot process your application without a letter from your landlord.		
Mailing Address, if different from above		
Mailing Address City, State, Zip		
If you have lived at your current address for less than one year, please list your previous address.		
Previous Address City, State, Zip		
Do you have a yard?	What size is your yard?	
What type of fence do you have?	How high is your fence at the lowest point?	
If you do not have a fence, and are applying to adopt a dog, how do you plan on exercising the dog and letting them out for the bathroom?		
Any Children?	If yes, list ages	List any other occupants of home
Are all household members aware of the intent to adopt? Circle One: Yes No		
Have you ever been arrested for, or convicted of, animal abuse or neglect? Circle One: Yes No		
Animal Preferences		
If you are applying for a specific animal, please list which one here.		
If you are not applying for a specific animal, please tell us about your ideal animal below.		
Cat or Dog?	Specific Breed?	
What age? Circle One: Puppy/Kitten Adult Senior		
What size?	Circle One: Teacup (under 10 lbs ex. Chihuahua) Small (10-20 lbs ex. Pug) Medium (20-50 lbs ex. Chow) Large (+50 lbs ex. Labs)	
What energy level? Circle One: Low Medium High		
Would you consider adopting a special needs animal (diabetes, deaf, blind, etc.)?		
Veterinarian Reference		
If you have had pets within the last 5 years, please provide your veterinarian's information below.		
Name of Veterinarian and Practice		Veterinarian's Phone Number
Customer Name Account is Under		
Veterinarian's Street Address, City, State & Zip		



Personal References							
Please provide two individuals over the age of 18, other than family members, that we may contact as references. Please let your references know that we will be contacting them.							
Reference Name #1			Relationship				
Phone Number			Alternate Phone Number				
Reference Name #2			Relationship				
Phone Number			Alternate Phone Number				
Current Pets in Your Home - Use Additional Sheets if Necessary							
Type (cat, dog, etc.)	Name	Breed (if applicable)	Years Owned	Sex	Spayed or Neutered? Circle One		
					Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	
Are all dogs current on Heartworm Prevention? Circle One: Yes No							
If not, please explain.							
Are all pets current on vaccinations? Circle One: Yes No							
If not, please explain.							
Pet History - Use Additional Sheets if Necessary							
Please list all animals you have owned in the last 5 years that are not listed above.							
Type (cat, dog, etc.)	Name	Breed (if applicable)	Dates Owned		Sex	Spayed or Neutered? Circle One	
			From	To		Yes	No
						Yes	No
						Yes	No
						Yes	No
Please list why these animals are no longer with you.							
Pet Care							
Where will the animal spend the day?			Where will the animal spend the night?				
Where will the animal be when you're not home?			On average, how many hours will the animal be left alone?				
What will you do with your pet if you move?							
What will you do with your pet if you have to evacuate?							
What type of training do you do (clicker training, obedience class, etc.)?							



Conditions of Adoption

In order to ensure that your home is the last stop for our animals, please read the following carefully and initial each item. By signing the form below, you are agreeing to the adoption terms and authorizing us to contact your references and veterinarian. If you have any questions about the following, please let us know.

You understand that all animals placed by ARC will be spayed/neutered before being placed.

You understand that if you adopt from ARC, you are required to provide regular veterinarian care

You agree to a home visit by an ARC Representative.

You agree to allow ARC representatives post-adoption access to your home and the animal.

You understand that the adoption fee is non-refundable.

You understand that if for any reason you cannot keep the animal, you must contact ARC

You are 18 years or older.

You give us permission to contact your veterinarian about your pet(s) history with them and authorize them to release that information to Animal Rescue Center of Bay County, Inc.

Signature

Date

Please Print Name Clearly

Signature of Spouse

Date

Please Print Name Clearly

Adoption Procedure

The Adopter Application is the first step in our adoption process. Once we receive your completed application, one of our volunteers will call you to schedule a home visit. The home visit allows us to meet you and make sure that you will be a loving and suitable family for one of our animals. We will also be contacting your references at this time. Once the home visit and references have been completed with no problems, you will be approved to adopt and we will make arrangements at that time to sign all the necessary paperwork. This process typically takes a week. We will contact you as soon as we can to let you know whether you've been approved.

Please note that all adoptions are done on a first come, first serve basis (as long as it's a suitable home). This means that the faster you get your application form in, the more likely you are to adopt the animal you're applying for. This also means that other people may be applying for the same animal.

ANIMAL RESCUE CENTER OF BAY COUNTY, INC. RESERVES THE RIGHT TO REFUSE ADOPTION