



3934 North Hayston Avenue • Fresno CA • 93726 • (559) 233-8717
 Email: dogs@valleyanimal.org

PRE-DOG ADOPTION APPLICATION

Dog: _____

Date: _____

Adopter Name: _____

Co-Adopter Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Email: _____ (Required)

How long have you been at this address? _____ Rent Own

Name of Landlord/Manager: _____

Landlord Address: _____ Phone: _____

Do you have a secure, fenced yard? Yes No How large is the yard? SM MD LG

Will you keep the dog: Inside Outside Both

If you move, will you take the dog with you? Yes No

Adopter Employer: _____

Other source of income: AFDC Alimony/Child Support Disability/Pension Unemployment
 Other If other, please explain: _____

Co-Adopter Employer: _____

Other source of income: AFDC Alimony/Child Support Disability/Pension Unemployment
 Other If other, please explain: _____

Is this pet for you? Yes No If no, for whom? _____

Have you ever had a pet? Yes No If yes, what kind? _____

Do you still have the pets? Yes No If no, why? _____

Are your pets spayed or neutered? Yes No If no, why? _____

Do you have any known allergies to dogs? Yes No Do you suffer from asthma? Yes No

If yes, explain: _____ If yes, explain: _____

Are you a frequent traveler? Yes No If yes, how often? _____

Do you have children? Yes No If yes, what ages? _____

Children may be scratched or bitten by a pet (especially a playful puppy). If you or a child does receive a scratch or bite, will this be a reason for you to return the animal to the shelter? Yes No

Would normal wear and tear on household items be a reason to return this animal to the shelter? Yes No

Veterinarian: _____ Phone: _____

Are you financially able and willing to give the dog any medical care it may need? Yes No

The life span of a dog may be up to 15 years. Are you prepared to care for this dog for its natural life? Yes No

Do you have someone who will care for the dog if you are unable to for any reason? Yes No

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

The Adopter hereby understands and agrees that any and all fees charged for the adoption of this animal are **NON-REFUNDABLE**. The Adopter also understands and agrees that if any animal adopted from the Valley Animal Center is not compatible in their household or does not work out for any reason, the animal may be returned within 30 days of the date of this contract. If the Adopter found that this animal was incompatible, but would like to exchange it for another animal, the animal may be exchanged within 30 days of the contract, pending approval. The Adopter understands that they are only allowed to make a one-time exchange. _____ (Please initial)

After the 30 day period has expired, the Adopter may return the animal to the Valley Animal Center only upon approval from the Shelter Manager and with the requirement of a surrender fee, to be determined by the Shelter Manager. _____ (Please initial)

Applicant Signature

Co-Applicant Signature

How did you hear about us?

VAC Website Facebook Twitter Friend

Vet office Other, please specify: _____

Adoption Counselor: _____

Name

Application Approved: _____

Initials

Date

Application Rejected: _____

Initials

Date

Manager Review: _____

Initials

Date