

Loved Again Pets

Foster / Adopt Application

To help us find the best possible homes for our animals, we require all foster and adoptive families to fill out the following application and contract.

The adoption fee is used to pay for medical costs. If the adoption fee is waived on the animal you are adopting, please consider giving a small donation to help us with medical costs for our senior and hospice animals.

Please print clearly:

Adopters must be 18 years of age or older. A representative will do a home visit and meet & greet with all family members before the animal is released to their new family.

Animal's Name: _____ Cat Dog Other _____ Adoption Fee: _____

If this is an adoption, the adoption fee is required at the time you start the "foster to adopt" process. At the end of the trial period, your check will be deposited and your finalized paperwork (including medical history) will be mailed. Your check will be returned, if an adoption isn't finalized.

Name: _____

Second applicant: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Phone # (Cell): _____

Phone # (Home): _____

GENERAL INFORMATION:

1. How many adults live in your home? _____
2. How many children live in your home? _____
3. Do you live in a: House Apartment Condo other _____
4. Do you rent or own your home? _____
If renting, who is your landlord? _____ Phone# _____
Do you have permission to have a pet? _____ Deposit paid? _____
5. I _____ (print name), hereby give permission for my landlord to release information to Love Again Pets concerning my pet deposit, or other rules regarding pets.
6. How long in the current residence? (years / month) _____
7. Do you have a fenced yard?: _____ What type of fencing? _____
8. How many pets are currently living in your home? _____
_____ Dogs (breed & size) _____ Cats _____ Other (If other, specify) _____
9. Does anyone in your household have allergies to animals? _____
10. Who will be the primary caregiver of this animal? _____
11. Have you considered the cost of owning an animal? (Vet care, housing, training, food, etc.) _____

FOR DOG ADOPTERS:

12. How long will the dog be left alone in a normal day? _____
13. How or will you keep your dog confined when you're not home? _____
14. Where will the dog sleep at night? _____

GENERAL INFORMATION CONTINUES:

15. Name and phone # of your current veterinarian _____
16. As you may know, some senior animals begin to have potty problems later in life. Are you able to work with the animal if this is the case? _____
17. Have you cared for a senior or hospice animal before? _____
18. Under what type of circumstances would you NOT keep this animal? _____

LOVED AGAIN PETS RESERVES THE RIGHT TO REFUSE ANY APPLICATION FOR ANY REASON OR NO REASON. OUR MISSION IS TO MATCH UP ADOPTERS AND ANIMALS TO THE BEST OF OUR ABILITY.

By submitting this application, I confirm that all information in this application is correct and complete. I acknowledge that I have read, understand and agree to all the terms and condition of the adoption contract. I authorize my landlord, veterinarian and any other parties contacted to release information confirming information contained in this application. Failure to provide accurate information will cause forfeiture of any adoption fee and ownership of the animal. Your signature will be required at the time of your meeting with a Loved Again Pets representative. Initial _____

Potential adopters are screened for suitability. Loved Again Pets reserves the right to refuse placement of an animal for any reason. Animals may be removed from the home if it is found unsuitable or if the contract is broken in any way at any time based on the discretion of the Loved Again Pets Board of Directors. Initial_____

Applicant's Signature _____

Co-Applicant's Signature _____

Loved Again Pets Representative who approved application: _____

Today's date (month/day/year) _____

Finalized / Return date _____

DO NOT WRITE BELOW THIS LINE. FOR LOVED AGAIN PETS REPRESENTATIVE ONLY:

An adoption fee was received or waived on _____ (date) in the amount of

_____ for _____ (animal's name)

Where the animal will be living:

Address: _____

Phone #: _____

Home Check Rep _____ Approved: Yes / No: Concerns? _____

Loved Again Pets

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