

Small Animal Adoption Application

Date _____
Name _____
Address _____
City, State Zip _____
Phone _____ Drivers License Number: _____ DOB: _____

Is this animal for ___ Yourself ___ Family ___ Someone Else ___ Gift
Type of animal you want to adopt

_____ Hamster	_____ Guinea Pig
_____ Gerbil	_____ Rabbit
_____ Rat	_____ Bird
_____ Mouse	_____ Reptile or Fish
_____ Ferret	_____ Chinchilla

What type of housing do you have for this animal? _____
What type of food are you going to feed this animal? _____
Do you plan to vaccinate this animal if applicable? _____
Do you plan to spay/neuter this animal if applicable? _____
Have you ever cared for this type of animal before? _____
If so, what type of care do they need? _____
Do you have children? If so, what role will they have in caring for this pet? _____

Have you had any other pets in the fast five years? _____
Are your current pets spayed/neutered? _____
Have you ever used the services of the Humane Society before? _____
If so, for what reason? _____
Do you currently own or rent the place you live? _____
Landlord's Name, Address & Phone _____

I have been shown the statement of adoption contract and understand and agree to abide by its terms. I also understand that any breach of this contract constitutes grounds for the Sioux Falls Area Humane Society to rescind this contract, in which case ownership of the animal will revert back to the Sioux Falls Area Humane Society.

Signature of Adopter _____ Date: _____
Employee Initials _____

*****For Employee Use Only*****

Animal Number: _____ Description: _____
Age: _____ Sex: _____ Name: _____
Date of Spay/Neuter (if applicable) _____