



APPLICATION FOR ADOPTION/FOSTER CARE

Date _____ Adoption/Slumber Party _____ Foster Care/Adventure Day

Name: _____ Home Phone: (____) _____

Address: _____ Cell Phone: (____) _____

_____ Email Address: _____

Mailing Address (if different) _____

*Do you qualify for our "Senior to Senior" Adoption Program? ____ Yes, I'm over age 55 ____ No

Do you: ____ Rent ____ Own ____ House ____ Apartment ____ Mobile How long at this residence? ____

If you rent, name, address & phone number of landlord: _____

Does your landlord have any pet breed or weight restrictions? ____ Yes ____ No If yes, what? _____

Does your landlord require a pet deposit? ____ Yes ____ No If yes, how much? \$ _____

Please note: If you rent, a copy of your rental agreement and/or a utility bill will be required to verify address.

Please list all residents in your household:

Name	Adult	Child Age	Hours away from home each day
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list place of work with address & phone number for each adult household member:

Adult member #1: _____

Adult member #2: _____

Adult member #3: _____

Have you discussed and confirmed that all household members are in agreement about this adoption/foster?
____ Yes ____ No

Do any household members suffer from animal related allergies? ___ Yes ___ No If yes, explain: _____

Who is your current veterinarian? _____ Phone# _____

What kind of animal would you be interested in adopting/fostering?

Domestic: ___ Dog ___ Cat ___ Puppy ___ Kitten ___ Rabbit ___ Guinea Pig/Hamster ___ Bird

Livestock: ___ Fowl ___ Horse ___ Cow ___ Llama ___ Goat ___ Pig ___ Sheep

Do you have any limitations in terms of the animal's size, age or special needs (i.e. healthcare, behavior, training needs, isolation):

Behaviors I prefer not to or can't manage are: _____

If adopting, are you willing to take full responsibility and care for this animal its entire life span? ___ Yes ___ No

Pets need to be inside the house and part of the "family". Would this be a problem? ___ Yes ___ No

What would the longest period of time the pet would be alone? _____

Do you have a fence? ___ Yes ___ No If yes, what is the height of the fence?: _____ Lockable Gate? _____

Is the fenced area escape proof? ___ Yes ___ No What is the fencing material?: _____

Please list all of the pets currently living in your household (including livestock):

Name	Type	Age	Sex	Sterilized	Date FVRCP (cat) DHPP/Rabies	Where is pet kept during the day/night
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

***A "Meet and Greet" at the shelter will be required with your dog(s) if you are applying to adopt/foster a dog.**

Do your current pets get along with: ___ Children ___ Cats ___ Dogs ___ Rabbits ___ Fowl ___ Livestock

Where will the adopted animal be kept: During Day _____

During Night _____

Who will be the primary caretaker of the animal(s)?: _____

Who would take care of your animals in your absence? _____

Are you able to commit and afford any training that may be necessary for the animal? ___ Yes ___ No

Please tell us about your training experience & philosophies: _____

Are you able to commit to exercising the animal? ___ No ___ Yes Describe: _____

If you move, will you take the animal with you? ___ Yes ___ No

Have you ever adopted an animal from BRHA before? ___ Yes ___ No If yes, when? _____

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

Have you ever had to give up or turn in an animal to a shelter? ___ Yes ___ No If yes, explain: _____

Have you ever abandoned an animal? ___ Yes ___ No If yes, explain: _____

Please give a brief description of why you want to adopt or foster an animal: _____

What do you think will be the most rewarding and challenging aspect of adopting or fostering an animal?:

If you're seeking to become a Foster Home, once the animal becomes ready for adoption, are you willing and able to assist in the adoption process? ___ Yes ___ No If no, please explain: _____

Please list two (2) personal references, who are not relatives nor live with you & their phone numbers:

Printed Name	Phone #	Relationship
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Printed Name	Phone #	Relationship
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I understand that if I am approved to adopt or foster, I will also be required to read and sign an Adoption or Fostering Agreement, which is a legal contract between myself and the Bitter Root Humane Association. I understand that BRHA does not possess undisclosed medical or behavioral history on this animal and said animal appears healthy at the time of this application. I agree to allow a BRHA representative to make a home visit prior to approving this application for adoption/fostering. I certify that all information I have given BRHA in conjunction with my adoption application is true and correct and understand that any falsification of said information may be grounds for denial of the adoption/fostering application.

Printed Name _____ Signature _____ Date _____

Pet Interested in _____ BRHA ID#: _____ PetPoint #: _____

To Be Completed by BRHA

Identity Verification: By Staff _____ *Copy of drivers license/ID attached

Form of address verification?: _____ By _____

DNA/PetPoint Checked?: ____ Yes By _____ Date _____

Landlord contacted?: ____ Yes ____ No If yes, did landlord approve? ____ Yes ____ No

Landlord contacted by: _____ Date _____

Meet & Greet Completed: ____ Yes ____ No If no, why?: _____

If yes, BRHA Staff that conducted the Meet & Greet: _____

Is this adoption approved by above staff? ____ Yes ____ No If no, why? _____

Home visit completed? ____ Yes ____ No Date conducted _____

If yes, BRHA representative that conducted the visit: _____

Home visit approved? ____ Yes ____ No If no, why?: _____

If yes, are any follow-up visits recommended? ____ Yes Reason? _____

Adoption Approved: ____ Yes ____ No If no, why?: _____

BRHA Representative _____ Date _____