



Date received: _____ By: _____
Animal Available? _____
Approved? _____ By: _____
Reason for denial: _____
Person notified: phone, email, other _____
Date notified: _____ By: _____

6228 Country Club Road, Murphysboro, IL 62966 (618)687-2079

Application for Adoption

Application Date: _____ Pet Applied For: _____

Name: _____ Mailing Address: _____

City: _____ State/Zip: _____

Phone: _____ Email: _____

Names and Relationships of People in Residence: _____

Type of Residence: _____ Do you Own or Rent? _____

Landlords Name and Phone Number: _____

Applicant's Employer: _____ Spouse's Employer: _____

Is anyone allergic to animals? _____ If yes, what type? _____

Number of pets currently owned? _____ Name, breed and age of each: _____

Are all your pets current on vaccinations? If no, why? _____

How many pets have you had in the past 5 years? _____

What happened to these pets, if you don't still have them? _____

Who will be primarily responsible for these pets? _____

What kind of pet are you looking for? Indoor _____ Outdoor _____ Indoor/Outdoor _____

Where will the pet be when you're home? _____ Not home? _____

When you're sleeping? _____

What type of pet are you looking for (circle one)? Dog Puppy Cat Kitten

Describe the perfect pet for your family: _____

Do you believe in hitting an animal? _____

If you move, what will you do with your pet? _____

For what purpose do you want a pet? _____

Will the dog go potty: on a leash _____ in a fenced yard _____ in a kennel _____ on a cable _____

If you go away, will you: board the pet _____ find a pet sitter _____ take with you _____

Where have your pets gone for veterinary care? _____

Vet's phone number: _____ Will you be a new client at this vet? _____

If used previously, when was your last visit? _____

Do you plan to use flea prevention? _____ Heartworm prevention? _____

How important is it to spay/neuter your pet? _____

Have you ever surrendered an animal to the Humane Society or other animal shelter? _____

If yes, describe the circumstances that led to the surrender: _____

Are you willing and able to work with your pet regarding behavior problems such as:

House breaking? _____ Adapting to a new environment? _____ Obedience issues? _____

How will you work on or handle these behavior problems? _____

Are you prepared to keep this pet for its lifetime? _____

Do you agree to notify St. Francis CARE if you are no longer able to keep and care for this pet? _____

Read and sign the certification and release clauses below to complete this application:

I CERTIFY THE INFORMATION I HAVE GIVEN IN THIS ADOPTION APPLICATION IS TRUE AND CORRECT. I UNDERSTAND THAT ST. FRANCIS CARE HAS THE RIGHT TO DENY ANY APPLICATION FOR ADOPTION FOR ANY REASON.

I HEREBY FOREVER RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS AND INDEMNIFY ST. FRANCIS CARE, ITS BOARD OF DIRECTORS, ITS MEMBERS, OFFICERS, AGENTS, AND VOLUNTEERS FROM ANY AND ALL CLAIMS, DEMANDS, ACTIONS, OR LIABILITIES OF ANY KIND WHATSOEVER ARISING AS A RESULT OF OR IN CONNECTION WITH ANY ANIMAL I MAY BE ALLOWED TO ADOPT.

Date: _____ Applicant's Signature: _____