923 Rail Dr. – PO Box 93 Ashland, WI 54806

715.682.9744

chaadopt@yahoo.com

**Small Animal Adoption Application**

|  |  |  |  |
| --- | --- | --- | --- |
| Your Name(s): |  | Home Phone #: |  |
| Address: |  | Cell Phone #: |  |
| City/State/Zip: |  | Email Address: |  |

**About Your Home**

|  |
| --- |
| Type of Home: House  Apartment  Mobile Home  Other: |
| Do you? Own  Rent  Live w/Parents  Live in dorm Other \_ | If you rent, please provideLandlord’s Name:Landlord’s Phone #: |

**Plans for your new Pet:**

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|  |  |  |  |
| --- | --- | --- | --- |
| What type of small animal are you looking to adopt? |  | Have you ever owned this type of animal before? |  |
| What type of enclosure do you have prepared? i.e. Cage, Hut, Aquarium, etc.Please describe: |  |
| How much time do you plan to spend with this animal? |  | Is this adoption a gift for someone else? Ifyes, whom? |  |
| Will the animal be kept indoors or outdoors primarily? |  | Who will be primary caregiver? |  |
| Do you currently have any other small animals? If yes, list type, sex, and if they are spayed/neutered |  | Do you plan on housing this small animal in the same enclosure as another animal? |  |
| Are you able to commit to providing a lifelong home? |  | Are you willing to bring this animal to the vet if medically necessary? |  |
| Does anyone have asthma or allergies that could be aggravated by this animal? |  | Are all household members in agreement with the adoption? |  |

**PLEASE READ THE FOLLOWING:**

* CHA reserves the right to refuse any adoption application.
* Animals are not placed on a “first-come-first-served” basis. Decisions are made considering the best fit for both the applicant(s) and the animal to minimize the chance of the animal being returned due to incompatibility.
* By signing below, you are certifying the information you have provided in this application is accurate and not misleading in any way.
* CHA reserves the right to contact any individual on this form including veterinarian & landlords, if applicable.
* CHA cannot guarantee the long-term health or temperament of any animal.
* Please fill in each section, CHA will not consider any incomplete applications.
* By signing below, you are certifying that you have read and understand the terms listed above. If you are emailing this form, you will be required to sign a hard copy of this form prior to adoption.

Please make sure all questions are answered and ask a staff member for clarification if necessary.

Signature: Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: Date: