



371 Ward Street, Port Hope, ON L1A 4A4

Phone (905) 885-4131

e-mail: [info@northumberlandhs.com](mailto:info@northumberlandhs.com)

Fax (905) 885-8027

### Small Animal Adoption Application

DATE: \_\_\_\_\_ NAME OF PET: \_\_\_\_\_ PICK UP DATE: \_\_\_\_\_

To be considered for an adoption, you must:

- have the knowledge and consent of all members of the household
- be 18 years of age
- have valid I.D and a current address
- understand that the Northumberland Humane Society has the right to refuse your application.

**Our goal is to ensure that you and your new pet have many happy, healthy years together and that the experience will be rewarding for you both. Please help us by answering the following questions honestly; your responses are kept strictly confidential. All questions must be answered to be considered for adoption.**

Please initial after reading \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt# \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you:  18-25  26-35  36-45  46-55  56-65  65+

Are you:  attending school  working full-time  part-time  retired

Other (please specify) \_\_\_\_\_

Do you:  Own  Rent  Other (please specify) \_\_\_\_\_

Please provide your landlord's name and phone number: \_\_\_\_\_

Where did you see/hear about this pet?

- "Pet of the Week" Article  Newspaper article  Website  Media (Radio/TV)
- Shelter visit  Pet Store  Facebook

Other (please specify) \_\_\_\_\_

How many adults are in your household? \_\_\_\_\_ How many children are in your household? \_\_\_\_\_

Please list your children's ages: \_\_\_\_\_

How will you educate young children to understand appropriate pet interaction and provide the guidance and diligence necessary to ensure that neither child nor pet gets hurt?

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

Is anyone in your household allergic to animals? \_\_\_\_\_

Even if no one is allergic at the present time, what will you do if you or a family member develops allergies to the animal(s)? \_\_\_\_\_

\_\_\_\_\_

Do you have any other current pets? **(Please list them, with their names, ages and whether or not they are spayed or neutered).** \_\_\_\_\_

\_\_\_\_\_

Please list your previous pets in the last 7 years: \_\_\_\_\_

\_\_\_\_\_

Have you ever had to give up or rehome a pet? \_\_\_\_\_

\_\_\_\_\_

Please provide your veterinarian's name and phone number that you have used for the past 5-7 years  
(If you have used more than 1 vet, please list all that apply, with phone numbers if possible)

\_\_\_\_\_

\_\_\_\_\_

Please explain your reasons for adopting a pet today, (i.e. Companion, pet for child, etc)

\_\_\_\_\_

\_\_\_\_\_

If you go on vacation, what will you do with your pet? \_\_\_\_\_

\_\_\_\_\_

This pet will be alone for \_\_\_\_\_ hours/day, \_\_\_\_\_ days/week

Please describe the activity level in your home  Very Busy  Somewhat Busy  Quiet

What kind of housing will you be providing for your pet? \_\_\_\_\_

What is the best diet for the small animal you want to adopt? \_\_\_\_\_

If spaying/neutering is not applicable, how will you avoid unwanted reproducing? (Breeding for sale or hobby is not allowed by NHS) \_\_\_\_\_

Please tell us about a pet's characteristics which are most important to you (check all that apply):

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Good with other pets | <input type="checkbox"/> Good with children | <input type="checkbox"/> Friendly with me | <input type="checkbox"/> Low Maintenance |
| <input type="checkbox"/> Easy to handle       | <input type="checkbox"/> Playful            | <input type="checkbox"/> Quiet/Calm       | <input type="checkbox"/> Cuddly          |

Please tell us about your level of small animal experience

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> First-time owner | <input type="checkbox"/> Average experience | <input type="checkbox"/> Highly experience |
|---|---|--|

Some of our animals needing homes are from unstable backgrounds and may have some behavioural problems. They will require extra patience to mould them into satisfactory house pets. How long of an adjustment period will you give this animal? \_\_\_\_\_

Are there any circumstances under which you would return this animal? Please explain:

Are you willing and able to bear the cost of medical attention when necessary? \_\_\_\_\_

---

I certify that the information I have given is true and I authorize investigation of all statements in this application.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Feel free to add any additional information on the back that you feel would help us process your application.