



Small Animal Adoption Application

Name of the Small Animal: _____ Date: _____

We carefully screen each applicant to ensure that our animals are matched with the right guardian in the best possible home. An incomplete application will not be processed.

Please note that this application will be filed as property of the NHS once submitted. This application will be reviewed by our staff members and it may take up to a week to be processed. We reserve the right to decline applications for any reason.

To be considered for an adoption you must:

- Have the knowledge and consent of all members of your household.
- Be 18 years of age.
- Have a valid I.D and a current address.

First Name: _____ Last Name: _____

Address: _____ Apt#: _____

City: _____ Postal Code: _____

Phone Number: _____ Email Address: _____

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

Other (please specify) _____

2363 Theatre Road, Cobourg, ON K9A 4W5
Phone: 905-885-4131, Fax: 905-885-8027

info@northumberlandhs.com www.northumberlandhs.com

Do you: Own Rent Other (please specify) _____

If renting you must provide landlord contact information and/or written approval *or we cannot process the application:* _____

Yes No Not applicable

How many adults are in your household? _____

Are your children between 0 to 18? *If yes, please state ages of your kids* _____

Do you have frequent visitors at the house (*children, grandchildren, etc.*)?

Yes No

Animal History Questionnaire

Is anyone in your household allergic to animals? Yes No

Please tell us about your pet experience with past and present pets? (*Please list them, with their names, ages and whether or not they are spayed or neutered, date of last vet visit and if they are currently in the household.*)

Please provide your veterinarian's name and phone number that you have used or are planning to use if you have not had one before. (*If you have used more than 1 vet, please list all that apply, with phone numbers if possible*)

Have you ever had to give up or rehome a pet? *If so, what were the circumstances?*

Please explain your reasons for adopting a pet today and what your ideal pet would be:

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

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How many hours will you leave the pet left alone?

___ on weekdays? ___ on weekends?

Please describe the activity level in your home:

_ Very busy _ Somewhat busy _ Quiet

About the Small Animal you would like to Adopt

What temperament are you looking for in a small animal? (check all that apply):

_ Likes other pets _ Good with kids _ Easy to handle _ Playful _ Quite

Why would you like to adopt this small animal?

_ Companion to person _ Companion to another pet _ For a child

_ Surprise/Gift _ Other _____

What is your plan of introducing the small animal to your current animals at home?

Some of our animals needing homes are from unstable backgrounds and may have some behavioural problems. **How will you help your new pet adjust to their new home and family?** Please provide all the steps you will take to help them become comfortable:

Would you ever return a small animal for the following reasons?

If applicable, check more than 1:

_ Not good with other pets _ Not good with children _ Allergies

_ Too energetic _ To high maintenance _ Other: _____

Do you plan on purchasing pet insurance? _Yes _No

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

Signature: _____ Date: _____

