

## Pocket Pet/Exotic Adoption Application

The Greater Huntsville Humane Society reserves the right to refuse any pet adoption.

Pet applying for: \_\_\_\_\_ SB# \_\_\_\_\_

### Contact Information

Name: \_\_\_\_\_ Spouse/Partner/Roommate: \_\_\_\_\_

Address: \_\_\_\_\_ Apt# \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Occupation: \_\_\_\_\_ Spouse/Partner Occupation: \_\_\_\_\_

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ Are you at least 21 years of age? **YES** or **NO**

Emergency Contact: \_\_\_\_\_ Contact Number: \_\_\_\_\_

### Adoption Questionnaire

Do you live in a: **HOUSE**  **APARTMENT**  **CONDO**  **MOBILE HOME**  **OTHER:** \_\_\_\_\_

Do you: **OWN**  **RENT**  Landlord's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

How many people live in the home besides you? \_\_\_\_\_ How many children? \_\_\_\_\_ Ages? \_\_\_\_\_

Do you live with your parents, grandparents, etc.? **YES** or **NO**

Is anyone in your home allergic to pet fur, dander, bedding or hay? **YES** or **NO**

Is everyone in agreement with the decision to adopt a new pet? **YES** or **NO**

Reason for wanting this pet? **Companion**  **For Children**  **Gift**  **Companion for pet**

Are you financially stable enough to provide adequate food, water, shelter and medical care for your pet? **YES** or **NO**

Who will be the primary caregiver for the pet? \_\_\_\_\_

What will you do with your pet if you have to travel, move or go on a vacation?  
\_\_\_\_\_

How many hours will your pet be left alone and unattended in a normal 24-hour day? \_\_\_\_\_

Do you plan to keep your pet:

**EXCLUSIVELY INDOORS**  **INDOORS/OUTDOORS**  **PRIMARILY OUTDOORS**

Please describe the type of habitat your adopted pet(s) will be living in:  
\_\_\_\_\_

Please describe where in the home your adopted pet(s) habitat would be located:  
\_\_\_\_\_

What type of bedding/substrate/litter do you plan to use for your pet(s)? \_\_\_\_\_

Please describe your pocket pet experience:

This will be my first pocket pet       I've had one before       I'm experienced and knowledgeable

What research have you done to prepare for this type of pet?  
\_\_\_\_\_

How much exercise (out of cage time per day) will you allow this pet? \_\_\_\_\_

Are you planning to bond this animal with another pet you already own? **YES**    **NO**

Would you like a pocket pet that you can handle/pet:     **A little**       **Some**       **A lot**

Is your family's lifestyle: **Active/Athletic**     **Quiet/Laidback**     **Busy/On the go**     **Average**

Please list the pets you currently own or have owned in the last 6 years:

Name of pet	Type/ Breed	Age	Sex	Spayed or neutered?	Shots up to date?	Do you still have this pet?	If no, why?

Who is or will be your current exotic pet veterinarian? \_\_\_\_\_ Phone: \_\_\_\_\_

**Please note that it is unrealistic to expect a child of any age to assume complete responsibility for an animal. Ultimately, the adult(s) of the household are responsible for the complete care of the animals in the home. Are you prepared to take full responsibility for this animal should your child/children become disinterested?**      **YES**      **NO**

**Legal Agreement**

I understand that GHHS has the right to undergo a pre-adoption inspection of my home. **INITIAL:** \_\_\_\_\_

I understand that GHHS adoption fees are NON-REFUNDABLE. **INITIAL:** \_\_\_\_\_

I understand that once the adoption is completed and contract is signed, I am thereafter responsible for any veterinary care my new adopted pet may require. **INITIAL:** \_\_\_\_\_

I understand that all adoptions are on a first come, first serve basis on the day of availability. Approval of this application does not reserve a pet, but approves me to adopt from GHHS. **INITIAL:** \_\_\_\_\_

I certify that the above information is true and correct to the best of my knowledge. I also acknowledge falsification of the above can result in my being denied any adoptions of a shelter pet. I understand that completion of this application does not guarantee an adoption.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**STAFF USE ONLY**

**APPROVED**     **DENIED**     **APPROVAL PENDING**       **Adopter SB #** \_\_\_\_\_

Staff Initials: \_\_\_\_\_ Date: \_\_\_\_\_