

Choices 1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_ Date: \_\_\_\_\_

## Dorchester Humane Society Foster Application

NAME OF APPLICANT (S) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COUNTY \_\_\_\_\_ HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

**E-MAIL** \_\_\_\_\_ ALTERNATIVE PHONE \_\_\_\_\_

HOW LONG HAVE YOU LIVED AT THE ABOVE ADDRESS? \_\_\_\_\_ IF LESS THAN 4 YEARS, LIST PREVIOUS:

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

ARE YOU 21 YEARS OR OLDER? ( ) YES ( ) NO

LIST TWO PERSONAL REFERENCES (**NON-FAMILY MEMBERS**)

NAME	DAYTIME PHONE NUMBER	PLEASE GIVE TWO	LENGTH KNOWN

LIST **ALL PERSONS** LIVING IN YOUR HOUSEHOLD (INCLUDING ROOMMATES AND/OR SIGNIFIGANT OTHER):

NAME (LIST LAST IF DIFFERENT)	RELATIONSHIP	AGE <b>IF UNDER 18</b>

DO YOU: ( ) OWN / ( ) RENT / ( ) LIVE WITH FAMILY

**If you rent, you will be required to supply a copy of your lease stating that you may have this pet.**

RESIDENCE TYPE: ( )HOUSE ( )APT/CONDO ( )TOWNHOUSE ( )MOBILE HOME ( )FARM

HOW LONG WOULD THE ANIMAL BE LEFT UNSUPERVISED ON A DAILY BASIS?

1-4 HRS ( ) 4-8 HRS ( ) OVER 8 HRS ( )

ARE YOU FINANCIALLY PREPARED TO TAKE YOUR NEW PET FOR A COMPLETE VETERINARIAN EXAM WITHIN 7 DAYS OF ADOPTION AND CONTINUE ON YEARLY BASIS? ( ) YES ( ) NO

<b>DURING THE DAY?</b>
<b>AT NIGHT?</b>
<b>WHEN ALONE?</b>
<b>WHEN YOU TRAVEL OR VACATION?</b>
<b>WHILE OUTSIDE NOW?</b>
<b>WHILE OUTSIDE WHEN OLDER?</b>

**WHERE WILL THIS ANIMAL BE KEPT AT THE FOLLOWING TIMES?**

**PLEASE BE SPECIFIC:**

PLEASE LIST **ALL ANIMALS** CURRENTLY LIVING IN YOUR HOUSEHOLD.

NAME	TYPE	SPAY/NEUTER	NAME & PHONE # OF VET USED	AGE

PLEASE LIST **ALL ANIMALS** YOU HAVE HAD IN THE **PAST 7 YEARS**

NAME	TYPE	SPAY/NEUTER	HOW LONG OWNED	VETERINARIAN USED	WHAT HAPPENED TO PET

HAVE YOU APPLIED FOR ADOPTION BEFORE WITH US? (\_\_\_) NO (\_\_\_) YES WHEN: \_\_\_\_\_

HAVE YOU APPLIED FOR ADOPTION AT ANY OTHER HUMANE SOCIETY OR SPCA? (\_\_\_) YES (\_\_\_) NO

HUMANE SOCIETY OR SPCA	LOCATION	DATE AND OUTCOME

WHY DO YOU WANT TO ADOPT THIS ANIMAL? \_\_\_\_\_

- **I HEREBY AUTHORIZE THE DORCHESTER HUMANE SOCIETY TO CONTACT MY LANDLORD/PROPERTY OWNER TO VERIFY THAT THE INFORMATION ON THIS FORM IS CORRECT.**
- **I FURTHER AUTHORIZE THE DORCHESTER HUMANE SOCIETY TO CONTACT MY VETERINARIAN AND PERSONAL REFERENCES LISTED ABOVE TO OBTAIN ANY INFORMATION NEEDED TO PROCESS MY APPLICATION.**
- **I UNDERSTAND THAT THE DORCHESTER HUMANE SOCIETY MAY NOT BE ABLE TO ADOPT THE ANIMAL OF MY CHOICE AND RESERVES THE RIGHT TO CHOOSE THE BEST QUALIFIED HOME FOR THE ANIMAL.**

**SIGNATURE OF APPLICANT (S):**

\_\_\_\_\_  
\_\_\_\_\_  
**DATE:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_