

## **Ketchikan Humane Society PRE-ADOPTION APPLICATION QUESTIONNAIRE- DOG/PUPPY** Mail this application to: P.O. Box 6243, Ketchikan, AK 99901



or, Email this application to: ktnhumanesociety@yahoo.com

907-821-0274

Name:	Home Phone	e:			
	Work Phone:				
-	City:				
			<b>1</b>		
	Employer:				
Spouse/Partner Occupation/Employer:			Phone:		
How did you hear about the	Ketchikan Humane Society?	)			
considering making a commitm and we want to be sure that thi	th it may take time to complete, nent to feed, shelter, protect and s is the pet that best suits you. n vaccinations and spayed/neut th your veterinarian.	Î love an animal for th <mark>Fo adopt from KHS a</mark>	he rest of his/her life, Ill dogs and cats in		
Briefly describe why you we	ould like to adopt a puppy/do	og:			
Do you live in: $\Box$ House $\Box$	Condo $\Box$ Mobile Home $\Box$ A	Apt Complex name:			
Do you:  Rent  Own	$\Box$ Lease to buy				
If you rent, lease to buy or l	live in a condo we will need o	<mark>a landlord/complex</mark>	<mark>: permission letter.</mark>		
Please name all adult househ	nold members and other signi	ificant adults this do	og will interact with		
Name:	Name:				
Name:	Name:				
Number of children UNDEF	R the age of 18: Their	r ages?			
For whom are you adopting	this pet? □ Self □ Childre	en □ Family □	Gift		
Other reason?					
Who will be primarily respo	nsible for the care and super-	vision of this pet?			
Do any household members	have known allergies to dogs	s/cats?			
How much do you expect to	spend annually for food, me	edical care, proper s	shelter, toys,		
licenses, grooming, and othe	er expenses?				
How long are you prepared	to care for this dog?				
What will you do with this d	log/puppy if you move?				
Are you prepared to seek veterinary care when this dog is sick or injured?					

Under what circumstances would you give this dog/puppy up?

As an adult, have you owned a dog? Was it spayed/neutered?									
If no, why not?									
What type of dog do you prefer?  Active/Lively?  Calm/less active? Breed? What form of exercise will you provide for this dog? What bad habits or destructive behavior will you not tolerate?									
						How many hours each	h day will this dog be	e WITHOUT human c	companionship?
Have you ever house	broken a dog before?	How?							
Have you crate traine	d a dog before?	How?							
Are there other pets in	-								
			and those you no longer have:						
		-	? What happened to it?						
		-							
As a puppy, where w	ill this dog be kept w	hen: You are home? _							
At night?		Home alone?							
At night?		Home alone?							
			?						
			e Number?						
-			learn more about you:						
-			Phone:						
			Phone:						
•									
You will need to provide	KHS with a written lette	er from your landlord/prop	perty manager/owner. <mark>If you do not</mark>						
-	with your application we	will assume you are not al	llowed to have a pet in your rental						
property. I CERTIFY THAT THE	ABOVE IS TRUE ANI	D UNDERSTAND FALS	E INFORMATION MAY RESULT						
IN NULLIFYING MY A	BILITY TO ADOPT FI	ROM KETCHIKAN HUN	MANE SOCIETY. I						
UNDERSTAND THAT	THIS QUESTIONNAIR	RE REMAINS THE PRO	PERTY OF THE KETCHIKAN						
,	·	IIS, I AGREE TO ALLO	W KHS TO ACCESS MY						
VETERINARY RECOR									
SIGNED:	hotors adoption We are	(I am over 21 years) DATE: on. We are an all-volunteer organization. It will take a week, or longer, to process your							
application. Thank you for co		in-volunteer organization. It w	m take a week, or longer, to process your						