

Tri –County Animal Rescue Center
9562 Route 322
Shippenville, Pa 16254
(814) 918-2032



DOG ADOPTION APPLICATION FORM (Page 1)

Name	Email
Street Address	Home Phone (incl area code)
City, State Zip	Cell Phone (incl area code)
Name of the dog(s) you wish to adopt	

REFERENCES (only 1 relative; by providing the following info you give your consent for us to contact them)

References Name & Relationship to you	Phone number (incl area code)
References Name & Relationship to you	Phone number (incl area code)
Current Vet	Phone number (incl area code)

Why are you interested in adopting this particular animal?

Adopting an animal should not be entered into lightly. The following questions are asked to ensure a mutually beneficial match between the animal that you are interested in and your family's lifestyle.

LIFESTYLE INFORMATION

How many adults in home? _____

How many children are in the home and what are the ages of children?

Does anyone in your home have allergies to animals? Yes No

Have you ever had experience with an animal this age? Yes No

What times will the animal be alone?

Will you provide obedience training? Yes No

Where will animal be kept? Outdoors Indoors

Did all members of your household agree to adopting this dog? Yes No

What Energy Level are you looking for in a dog/puppy? High Medium Low

DOG ADOPTION APPLICATION FORM (Page 2)

How many and what type of pets do you currently own? _____

(Please provide dog(s) names, if any.)

MEDICAL INFORMATION: The following information will be verified with your veterinarian.

Do all your dogs/cats have a current Rabies Vaccination and current tag? Yes No

Are your dogs/cats up-to-date on all vet-recommended vaccinations? Yes No

Are all of your animals spayed/neutered? Yes No If no, why not? _____

What type of heartworm preventative do you use? _____

RESIDENCE INFORMATION

What type of home do you live in? Apartment Single Family Home Trailer
 Other _____

Do you Own or Rent? Own Rent _____

If you rent, does your landlord allow pets? Yes No

Do you have authorization from your landlord to have a pet? Yes No

If applicable, name of landlord and phone number so we may contact them or please provide a copy
of your lease. _____

Fenced yard? Yes No If so, how high is the fence? 4-5ft 5-6ft 6ft or higher _____

If you do not have a fenced in yard, how will you safely allow your pet time to go outside
for exercise and going to the bathroom? _____

If you become ill or need to travel who will care for animal? _____

STATEMENT OF UNDERSTANDING

- Affirm that you have read the posting regarding this animal.
- Agree to maintain on monthly flea/tick preventatives.
- You are financially able to care for animal.
- You agree to provide adequate shelter/medical care.
- You agree to provide adequate food/hygiene/companionship.
- Agree to have the pet spayed or neutered.
- You understand that completing this application does not guarantee that this application will be the one approved.
- You affirm that everything you have stated is true.

Adoption fees, including tax on the adoption portion of the fee, are:

- \$132.50 (\$125.00 + \$7.50 tax) for those dogs spay/neuter prior to Tri-County ARC
- \$232.50 (\$125.00 + \$7.50 tax + \$100.00) for dogs that we spay/neuter or voucher for Clarion Animal Hospital (adoption fee plus spay/neuter charge)
- \$182.50 (\$125.00 + \$7.50 tax + \$50.00) spay/neuter deposit for puppies; deposit is refundable with proof of spay/neuter

Please return it to a volunteer so that we may review it with you. The entire adoption procedure may take 1-7 days. We reserve the right to refuse an adoption.

Applicant's Signature

(If under 18, parent's
signature required)

Date _____