SMALL ANIMAL ADOPTION FORM

_____Guinea Pig     _____Rabbit     _____Hedgehog

Date_____________ Notified __________      PF _____

Please Write Clearly, if we can’t read it, we can’t process it!!

Name_____________________________________ Phone#__________________________

Street Address________________________________________________________________

City____________________________________ State_______________ Zip_______________

Email address________________________ Do you OWN or Rent? __________

If you rent, please provide your landlords contact information, including phone # and/or email address____________________

Does any member of your household have pet allergies?      Yes             No

Are there children in your house?      Yes __________ No _______ Ages__________________

List the names of all adults living in the household:____________________________________

How long each day are you away from home? ________________________________________

Are there pets in your home now?      Yes __________ No _______

   What type of pets and how many?  Cat_______     Dog_____

   Where will you keep this small animal?   Inside_______    Outside_______    Both___________

   If you indicated Both, please explain _____________________________________________

   How will you contain this small animal? ____________________________________________

____________________________________________________________________________

If you currently own animals, please list your veterinary reference where vaccination records can be found and whose name they will be under. _________________________________

   Vet clinic ___________________________ Phone#__________________________

Please contact Your Veterinarian and give them permission to release your records so that we may finish your pre-adoption form. Then let us know when we can call them.

What is your animal ownership experience? __________________________________________

____________________________________________________________________________

What requirements must this small animal have? __________________________________

How experienced do you feel you are as a small animal owner? _________________________

____________________________________________________________________________

Anything else you would like us to know? _________________________________________

____________________________________________________________________________

Signature

I ________________________________ give the Northwoods Humane Society
permission to confirm any information provided in this application that they deem necessary.
This information will be held in confidence and used only for the purpose of adoption.

2/2021