

Griffin Pond Animal Shelter

The Humane Society
967 Griffin Pond Road | South Abington Twp., PA 18411
Phone: 570.586.3700 | Fax: 570.586.4375
www.griffinpondanimalshelter.com

Adoption Application

candidates for your consideration. Please be a Are you 21 years of age or older? YES	-	=	DOB:/	/
Adopter Name:	Ноте	Phone:	Call D	/
Adopter Name:Address:	rione	riione.	State	7in
F-Mail Address:	Driver'	 s License #	State	State
Previous name/maiden name?		, <u></u>		
REFERENCES				
Veterinarian	Phone	Number:		Years Used:
Other info				
(Please list any veterinarian you may have use		you do not ha	ive any pets curr	ently. If vet records would be listed
under someone else's name, please list their n	ame and relation to	you.)		
(3) PERSONAL REFERENCES, other than your v	veterinarian. (One f	family membe	r only)	
	PI	none Number		
A. QUESTIONS REGARDING YOUR HOUSEHOL		ione maniber_		
		name:		Ph#
1. Occupation City		St Zip		
How long employed with this employer?				
2. Spouse/Partner Information				
Spouse/Partner name:	Em	ıployer		
Spouse/Partner name:Employer's address:		City	St	Zip
How long employed with this employer?	Driver's L	.icense #		_State
3. Do you Own or Rent your residence?	Landlord*	*		Ph
(**Please inform your landlord of your desire				
owner's name and phone number, even if it is	s a family member.	Landlords hav	e 5 days to retu	irn our phone call or we must mov
on to the next applicant.)				
Which of the following best describes your cur Single home Double home		-	Apartment	
Single nome Double nome	Townhouse		Apartment	Mobile Home
How long have you lived at your current reside	ence?			
Are you planning to move within the next 6 mg				
NOTE: If you rent/lease your place of residence	•		uested before t	he adoption can be finalized.
4. Previous Addresses?		•	•	
5. Is this pet a gift? For whom?				
6. Where will this pet be kept when you aren't				
7. How will you keep your new pet confined to	your property?			
8. If your pet is alone more than 6hrs each day		ill you make fo	or a dog to reliev	ve itself and get exercise during you
ahsence? (Please explain)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Ages		
absence? (Please explain)	w iviany?			
absence? (Please explain)	w Manyr			
ahsence? (Please explain)	m Many? ngements will be m	ade for the car	e of your pet? _	
absence? (Please explain)	ngements will be m	ade for the car		

B. QUESTIONS REGARDING YOUR C	URRENT AND PRIOR PET OWNERSHIP
11. Have you owned dogs or cats be	fore? Where are those pets now?
12. Have you adopted from us or an	other shelter or rescue group in the past? Where? When?
13. Have you ever needed to bring a	n animal to a Shelter? Explain
14. What other animals currently liv Name Breed Sex ———————————————————————————————————	e at your residence? (Please list and explain each below) Spayed/Neutered? Age Time Owned Kept Where Declawed?
15. Have you, or any other member	ong has it been since you've had a pet? of your household, ever been investigated by any animal welfare organization, including
the S.P.C.A., Humane Society, etc.? C. QUESTIONS REGARDING THE PET	VOLLARE SEEKING
	dog into your home at this time?
	o the age or gender of your new companion? <i>(Please circle all that apply)</i> 1-2 years 2-4 years 4-6 years 6+ years Preference
18. Breed preferences?	
	terest in this/these particular breed(s)?
	ed dog should attend introductory "obedience training." Would a formal obedience training all be interested in? (If NO, please provide a brief explanation.)
D. MEDICAL/FINANCIAL	
21. Do you understand that this ado	ption commitment is for the pet's lifetime?
	ive this pet YEARLY vaccinations, YEARLY exams and the medical care it requires?
23. What is your view on spay/neuto 24. Do you have someone available	to care for your pet(s) should you no longer be able to physically or financially?
Their contact information: Name	Phone
understand that in the event that fa animal placed in our care may be re veterinarian to release information	ered each question on this Adoption Questionnaire and have provided truthful answers. I/W alse information has been given, we may be denied the right to adopt an animal and/or any equired to be returned and all fees paid by us will be forfeited. I/We authorize our pertaining to the care of our present or previous pets. We reserve the right to approve or information herein or obtained pertaining to the adoption of an animal.
	o respond after being contacted about my application, otherwise I will lose my place in line for a dog, a meet and greet must be scheduled with all dogs in my household as soon as roved.
Adopter's Signature	Date
	Approved Polycod Initials Date
Case # Rm.# Dog Cat	Approved Refused Initials Date Reason
Applicant Called Date	ReasonAdoptionsSurrendersCruelty
Date Filed	National Background Check