



Adoption Application

Box 2126

Hanna, AB T0J 1P0

Ph. 854-0706 Email: info@hannaspca.com

hannaspca.com

To be considered as an adopter you must:

- Be 18 yrs of age or older
- Have identification with your present address
- Have the knowledge and consent of your landlord and show written proof of rental/lease agreement in your name
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet
- **Completion of this application does *NOT* guarantee adoption of a Hanna S.P.C.A. animal.**

Name: _____ Application Date: _____

Address: _____

Phone (day): _____ (evening) _____ (work) _____

Employers Name and Address: _____

May we contact you by email? Yes No Email: _____

The purpose of this questionnaire is to select the most compatible home for all our animals. Thank you for your patience and time completing this form.

1. How did you hear about the Hanna S.P.C.A.? Hanna Herald Valley Times hannaspca.com

Petfinder.com aroundHanna.com Posters Q-91 Word of Mouth

Other If other, explain: _____

2. How did you hear about the animal you are interested in adopting? _____

3. Do all adult members of the household know that you plan to adopt an animal? Yes No

4. Who will be responsible for this animal? _____

5. List the responsibilities:

6. Are you willing to have a rep of H.S.P.C.A come to see where the animal will be living? Yes No

7. Do you live in a House Apartment Mobile Home Other _____

8. Do you Own Rent Live with parents, relatives, or guardian Other _____

9. If you rent, are you allowed to have pets your dwelling? Yes No

10. What is your Landlords name and address? _____

11. How long have you lived in your current address? _____ Do you anticipate on moving within the next six months? Yes No

12. Do you have children at home? Yes No Ages? _____

13. Are the children accustomed to and educated about animals? Yes No

14. Will the animal have contact with your children? Yes No

15. Is anyone in your household allergic to animals? Yes No

16. For what purposes are you adopting this animal? _____

17. Have you ever had a _____ before? Yes No

Was it fixed? Yes No N/A

How long did you have it? _____

What happened to it? _____

18. Do you have any pets? Yes No How Many? _____

19. Will your other pets accept this animal? Yes No

20. Please provide the following information on your other animals:

Species	Name	M/F	Age	Spayed/Neutered

21. Are all of your pets current on their vaccinations? (Within the last year) Yes No

- 22. Are any of your pets suffering from health problems? Yes No
- 23. What is the name of your veterinarian/clinic? _____
- 24. Where will the animal live and sleep? _____
- 25. How many hours per day will this animal be alone? (without human companionship) _____
How many hours per week? _____ Night? _____
- 26. How many pets, other than the ones listed, have you owned in the last five years? _____
- 27. What happened to them? _____
- 28. Under what circumstances would you give up your animal? _____

- 29. If this animal shows some behaviour problems such as scratching, biting, and eliminating in the house, what would you do to stop this? _____

- 30. Are you aware of the cost to maintain this animal? Yes No
- 31. Are you willing to spend this much or more for the care of this animal? Yes No
- 32. Are you ready and willing to accept the responsibility for this animal for its entire life? Yes No
- 33. What can you offer this animal? _____
- 34. Do you agree to provide a good permanent home, sufficient water, food, shelter, medical care and humane treatment for this animal at all times? Yes No
- 35. We contact periodically the adopter for an update to help ensure that the animal successfully adjusts to its new life. Do you consent to home visits after adoption? Yes No

Application information: All of the information you have provided in this application is true and correct. If any of the information changes, you will advise us promptly.

PLEASE NOTE THAT THE HANNA S.P.C.A PET RESCUE AND ANIMAL SHELTER RESERVE THE RIGHT TO REFUSE ADOPTIONS.

By signing below, I certify that the information I have given is true and that any misrepresentation of facts may result in my losing the privilege of adopting an animal from the Hanna S.P.C.A Pet Rescue and Shelter.

I understand that the Hanna S.P.C.A Pet Rescue and Shelter cannot guarantee the health, temperament, or training of this animal and hereby agree to release the Hanna S.P.C.A Pet Rescue and Shelter from all liability once the animal is in my possession.

I agree to pay the adoption fee of _____to the Hanna S.P.C.A for the adoption of this animal.

Animal Name: _____

Adoptive Owner's Signature:_____

Printed Name: _____ Date: _____

A rep from the Hanna S.P.C.A Pet Rescue and Shelter may be making a courtesy call to you within 7-10 days to see how things are going with you and your new pet(s). These animals are very important to us, and we want to do all we can to make the transition from foster home to your home as easy as possible.

The information on this application is strictly confidential and will not be shared with anyone outside the Hanna S.P.C.A Pet Rescue and Shelter unless permission is granted by the applicant.

Please drop off completed form at the Hanna Learning Centre or mail to:
Hanna S.P.C.A. Pet Rescue and Shelter
Box 2126
Hanna, AB T0J IPO