

**LAS VEGAS VALLEY HUMANE SOCIETY**  
**3395 S. Jones Blvd. #454**  
**Las Vegas, NV 89146**  
**(702) 434-2009**



### ADOPTION APPLICATION

We ask that you fill out your application completely. An animal is a friend for life and we want to assist the potential adopter in finding the animal most compatible with his/her lifestyle. An unwise adoption can result in an unpleasant experience for adoptive families and many times ruins the pet for any further adoption. We hope you will agree that the animal's welfare must be our foremost consideration.

NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CELL PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OCCUPATION \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ OTHER PHONE \_\_\_\_\_

1. Where do you live?  
House    Condo    Apartment    Dormitory    Mobile Home    Live with Parents

2. If renting: Name, address and phone number of landlord \_\_\_\_\_

3. How long have you lived at this address? \_\_\_\_\_

4. Do you plan to move in the next 6 months? \_\_\_\_\_

5. Number and ages of children \_\_\_\_\_

6. Are you interested in adopting a pet for:  
Yourself    Member of immediate family    Someone else

7. Type of Dog Desired: Check as many of the following that apply:  
Adult dog    Puppy    Male    Female    House dog    House & yard dog    Outside only  
When fully grown do you want your dog to be small    medium    or large    ?

8. Type of Cat Desired: Check as many of the following that apply:  
Adult cat    Kitten    Male    Female    Inside    Inside/Outside    Outside only  
Declawed    With help and guidance would you be willing to forego declawing and train cat to use a scratching post?    Yes    No

9. Please check any of the following reasons for wishing to adopt a pet:

CAT	DOG
Breeding	Breeding
Mouser	Guard Dog/Watch Dog
Companion	Companion
Family Pet	Family Pet

10. What pets do you currently have in your household?

	KIND		SPAYED/NEUTERED		KEPT WHERE	
Pet #1	dog	cat	yes	no	in	out
Pet #2	dog	cat	yes	no	in	out
Pet #3	dog	cat	yes	no	in	out

11. List pets owned in the past five years other than those listed above.

	KIND		SPAYED/NEUTERED		KEPT WHERE		TIME OWNED
Pet #1	dog	cat	yes	no	in	out	_____
Pet #2	dog	cat	yes	no	in	out	_____
Pet #3	dog	cat	yes	no	in	out	_____

12. Name of your veterinarian \_\_\_\_\_

13. Who will be responsible for this pet? \_\_\_\_\_

14. Where will this pet be kept during the day? \_\_\_\_\_ During the night \_\_\_\_\_

15. How many hours a day will it spend alone? \_\_\_\_\_

16. Where will it be kept when alone? \_\_\_\_\_

17. Do you have a fenced yard? \_\_\_\_\_ How high is the fence? \_\_\_\_\_

18. If no fence, how will you assure the pet will stay at home? \_\_\_\_\_

19. Do you travel a great deal? \_\_\_\_\_ If yes, how do you intend to provide for the pet while you are away? \_\_\_\_\_

20. The LVVHS does everything possible to ensure an animal is healthy but in many cases their backgrounds are unknown to us. Are you prepared to accept this uncertainty and provide necessary care? \_\_\_\_\_

21. If your job or career requires frequent transfers, what will happen to the pet you are thinking of adopting? \_\_\_\_\_

22. How did you hear about the Las Vegas Valley Humane Society and our adoption locations? \_\_\_\_\_

I understand the above questions and I authorize investigation of all statements contained in this application. I understand misrepresentation of facts or omission of facts is cause for denial of adoption. I understand the Las Vegas Valley Humane Society screens prospective adopters to protect the animals in its care and has the right to deny or approve this adoption application.

Drivers License #: \_\_\_\_\_ Signed \_\_\_\_\_

Date \_\_\_\_\_