

Name(s): _____

Address: _____ City/Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Email: _____

Employer: _____ Driver's License #: _____

Household Information

Please Select One: Own home Rent Live w/parents Military

Please Select One: House Apartment Condo Townhouse Duplex Mobile Home

How many people live in your household?: Adults _____ Children^(18 and under) _____

Ages of children: _____ Other Pets in the Household? _____

Is everyone in your house in agreement to adopt: _____ Primary Caretaker: _____

Are you a student? _____ Full-time/part-time

This pet will be kept: Totally Inside Mostly Inside Mostly Outside Totally Outside

Does anyone living in your household have any known allergies to:

Cats -- Yes/No

Dogs -- Yes/No

Other animals? -- Yes/No

Do you have an enclosed fenced yard attached to your home? Yes/No

Type of fence: Wood Chain Link Other _____ Height : _____ ft.

How big is your fenced yard? Large Medium Small

How long at current address? _____

Do you plan to move in the next 12 months? Yes/No

Time away from home:

home all day

out part-time

away 7-10 hours daily

other _____

Where will this pet stay while you are gone during the day? _____

Where will this pet sleep at night? _____

Are you willing to purchase a crate if needed? _____ Do you have a pet door? _____

Are you planning to enroll your pet in a professional training program? _____

Will you take this pet to obedience class and/or commit to professional training if necessary? _____

Do you plan to walk your dog off leash? _____ If so when/where? _____

Do you plan to visit off leash dog parks with your dog? _____

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Renter info

Does your landlord allow pets? _____ Is there a breed restriction? _____

Is there a weight/size limit? _____

Is a pet deposit required? Yes/No Can proof of deposit be obtained from your landlord? Yes/No

Name/# of apartment complex _____

Landlord Name _____ phone# _____

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Your Current Pets

Total number of pets currently owned: Dogs _____ Cats _____ others _____

Please list pets currently owned. Include ALL pets currently in household or on premises.

Dog/Cat	Name	Breed	Age	M/F	Indoor/Outdoor	Altered?	If not explain why

Are all the pets in your household current on shots? Yes/No

Please explain what you believe causes heartworm disease _____

Are current pets on heartworm preventative? Yes/No What kind? _____

Where do you purchase your heartworm preventative? Vet Other _____

What do you use for flea/tick prevention? _____

Do you know the risk of an expired rabies vaccination? Please explain: _____

Please list the veterinarian who can confirm your pets' medical status, including vaccination records, heartworm prevention, and spay/neuter status. _____

List 2 additional references name and phone: _____

Do you give us permission to call your veterinarian, other references and do a home check prior to adoption? Yes/No

What type of food do you feed? _____

Your Previous Pets

Please list pets not currently owned, but owned within the last 5 years

Dog/Cat	Name	Breed	Age	Months/Years Owned	What Happened To Them

Your New Pet

What pet are you interested in adopting? _____

Why do you want this pet? _____

Have you ever adopted an animal before? Yes/No

If yes, from who? _____

Have you ever given up an animal for any reason? or had it euthanized for any reason other than a terminal illness? Yes/No

If yes, please explain? _____

Are you getting this animal for yourself? _____ or as a gift _____ for _____

Please tell us what behaviors you are unwilling or unable to work through (after initial adjustment and training period attempted) digging chewing barking jumping
eliminating in the house storm/separation anxiety Other _____

Will you call us for advice/work with a trainer on any of these issues if a problem persists? _____

Do you plan to chain your pet in the yard? Yes/No

Can you keep your new pet away from your other pets in the house for at least one week when you are unable to monitor their interaction? Yes/No

Do you agree to abide by our guidelines and to return the pet to us if you cannot keep it; and to notify us if the pet is lost or dies? Yes/No

I understand that if the information provided on this application is incorrect or untrue, I will surrender this pet to NETRO upon demand. I agree to allow a representative to inspect my home and yard and if any violations of the contract are in evidence, I agree to allow an agent of NETRO to remove the animal from the premises and this entry shall not constitute trespass. I certify that all the information in this application is correct and complete to the best of my knowledge.

Signature _____ Date: _____

For NETRO use only

Approved by: _____

NETRO Representative: _____ Date _____

Notes: _____

Return Application to:

Northeast Texas Rescue Organization
P.O. Box 1772
Mount Pleasant, TX 75456

Questions/Contact Information:

Nancy Carney
903-563-2451
netrescueorganization@gmail.com