



**Vernon County Humane Society**  
**1150 Nelson Parkway**  
**Viroqua, WI 54665**  
**608-637-6955**

**Date of Application:** \_\_\_\_\_  
**Time of Day:** \_\_\_\_\_  
**Pet Name (if selected):** \_\_\_\_\_  
**Application Accepted By:** \_\_\_\_\_

**PET ADOPTION APPLICATION**

Please read this application, fill in the blanks, sign it, and return it to us at the address shown. The information you provide in this application and during our interview will help us find a good match for you.

MY PREFERENCES	EXERCISE
<p>I like pets that are:  <input type="checkbox"/> Short hair <input type="checkbox"/> Medium hair <input type="checkbox"/> Long hair <input type="checkbox"/> Any</p> <p>I prefer a <input type="checkbox"/> male <input type="checkbox"/> female  <input type="checkbox"/> kitten/puppy <input type="checkbox"/> adult <input type="checkbox"/> any age</p> <p>Please describe the temperament and activity level you are looking for in a cat. Check all that apply.  <input type="checkbox"/> zippy, high-energy, kitten/puppy-like  <input type="checkbox"/> mellow, easy-going  <input type="checkbox"/> a lap cat/dog  <input type="checkbox"/> very affectionate  <input type="checkbox"/> responsive  <input type="checkbox"/> independent  <input type="checkbox"/> talkative  <input type="checkbox"/> quiet</p> <p>Someone in my home is nervous or unsure of pets...  <input type="checkbox"/> very <input type="checkbox"/> moderately  <input type="checkbox"/> some (no experience with pets) <input type="checkbox"/> N/A</p>	<p>I prefer a pet whose energy level is:  <input type="checkbox"/> high <input type="checkbox"/> medium <input type="checkbox"/> low</p> <p>I prefer a pet that:  <input type="checkbox"/> will enjoy living indoors  <input type="checkbox"/> will enjoy being outside while I'm with him/her  <input type="checkbox"/> will come and go independently  <input type="checkbox"/> will enjoy living in our barn</p>
<b>ABOUT ME AND MY HOUSEHOLD</b>	<b>GENERAL</b>
<p>I share my home with _____ adults and _____ children.  Ages of children: _____</p> <p>I have children that visit or live next door.  Ages of children: _____</p> <p>I have _____ indoor cat(s), _____ in/out cats, _____ dogs, and these other pets and livestock: _____</p> <p>The noise/activity level in my home is usually  <input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high</p> <p>When it comes to keeping a clean and tidy house I am  <input type="checkbox"/> very particular <input type="checkbox"/> particular <input type="checkbox"/> easy going</p> <p>I need a pet that will tolerate being alone _____ hours/day.  <input type="checkbox"/> weekends <input type="checkbox"/> for frequent short trips</p> <p>I'd enjoy brushing or grooming my pet:  <input type="checkbox"/> rarely <input type="checkbox"/> occasionally <input type="checkbox"/> weekly <input type="checkbox"/> daily</p>	<p>My ideal pet would: _____  _____  _____</p> <p>Bad pet habits that I just can't tolerate are: _____  _____  _____</p> <p>Please tell us anything else you would like us to know about you or the pet you're looking for:  _____  _____  _____</p> <p>How will your new pet spend its days? (Circle all that apply):  Indoors Outdoors Crated Basement Garage  Porch Yard Barn Locked in room</p> <p>How will your new pet spend its nights? (Circle all that apply):  Indoors Outdoors Bedroom Kitchen Crated  Basement Garage Porch Barn Locked in room</p>



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### PET ADOPTION APPLICATION

Name (First, Middle initial, Last)		Date of Birth	Day phone
Spouse or partner's name		Date of Birth	Evening phone
Street address	Do you: <input type="checkbox"/> own your home <input type="checkbox"/> rent	Landlord's name	
City, State, Zip		Landlord's phone	
How long at current address?	If less than one (1) year, please show previous address:		
Are you: <input type="checkbox"/> working <input type="checkbox"/> attending school <input type="checkbox"/> retired <input type="checkbox"/> homemaker <input type="checkbox"/> other: _____	Employer's name:		
	Employer's phone:		
<b>What pets have you owned in the past five (5) years?</b>			
Pet's name	Breed/type of pet	Age and sex	Spayed/neutered
		M F	Y N
		M F	Y N
		M F	Y N
		M F	Y N
		M F	Y N
Who is/has been your veterinarian?		Veterinarian's phone	
Veterinarian's address			
<b>Please list two (2) personal references (not related to you):</b>			
Name	Address		Phone
Name	Address		Phone
I certify that the information I have given is true, and I authorize the Vernon County Humane Society, Inc. to contact veterinarians, landlords and references to investigate all statements in this application, and to do follow-up property checks.			
Signature: _____		Date: _____	
Spouse/Partner/Roommate Signature: _____		Date: _____	
Notes:			