Zeus' Place APPLICATION FOR ADOPTION (__CAT OR __DOG)

Applicants must be over 21 years of age, and not currently a student.

PLEASE PRINT ALL INFORMATION

First Name:					Last Name:				
Co-Applicant:									
Street Address:									
City:					State:			Zip Code:	
Occupation:									
Home Phone:					Cell Phone:				
Work Phone(s)					Email Address				
A complete answer to the following questions will enable us to become more familiar with your request and requirements and will help us find the right dog/cat to match your needs and expectations.									
Age desired: Any Specific Age Senior (8 yrs+ lg. breeds; 10 yrs+ sm. breeds):									
Is there a specific anim	nal from	our web site	that	you are int	terested in?	?			
If so, which one is it (if there is more than one with the same name, please specify color, gender or anything that would allow us to distinguish it from the other one)									
Why are you interested in this particular animal? Please specify.									
Would you consider one with Special -Needs such as one who requires medication for a permanent but controlled condition?									
Would you accept a m breed cat /dog?	ixed		Desired Activity Level: (High, Med, Calm)			l:			
Sex: (Male Female Eit	her)			Age of self, and all family members in home:					
Do they or other family members live with or visit you?									
Does your immediate family share your interest in adopting a pet?									
Who is the dog/cat primarily for: (Adult, Child, Elderly)									
Who will care for, train	and exe	ercise the do	g? C	Or care for,	train the ca	at?			
Does anyone in your household have allergies?				If Yes, to what allergens?					
May we visit your home prior to application approval?				If Yes, when?					
Please list all the pets	vou hav	e owned in t	he pa	ast ten veai	rs:				
Species	Sex	Spayed/ Neutered		What happened to the pet? If deceased, what was their age?					

Please provide the full name, address, and phone number of your current veterinarian:								
Name				Phone				
City				State & Zip				
Where do you purchase heartworm preventive if not from your veterinarian?								
Please identify any other veterinarians that you have used for the past three years:								
Name				Phone				
City				State & Zip				
Please explain what you know about Heartworms and Prevention?								
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	g have you lived at rent address?			Do you own or rent?				
Renters: F number:	Please provide Lan	dlord's name and	phone					
Do you have the permission of your landlord to have a dog? If so up to what size?								
<u> </u>			T					
Will the pet be allowed in the house?		How long alone (with	left					
	the dog/cat stay when the house?	vhen you are						
	you familiar with u pet during your a							
Is your yar	ır yard fenced?		Type of fence? (include Height, Width, and Length)					
	o not have a fence, install one? Approxin area?		nate size of pet's yard					
	e walked daily? ed/groomed?		Exercised	d in a fenced yard?				
Allowed to supervisio	run free without n?			dog receive formal e training?				
Have you before?	ever had a dog		Have you before?	ı ever owned a cat				
Are you av	ware that dogs ?		costs of n	aware that routine naintaining a dog/cat \$1,000 a year?				
				φ 1,000 a your:				
Have you ever sold, given away, or surrendered a pet to a shelter?								
If yes, please specify why?								
If you have cats, are they declawed? Do you plan on declawing a cat you adopt?								
Please tell us why you want a dog/cat:								

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including any special would be included requirements or red	tle of your lifestyle, your family al activities in which your dog/cat d. (If you have any special quests for a dog, please let us in more carefully match a dog to				
When you move, or what will you do with	evacuate due to a hurricane, n your dog/cat?				
Do you understand to concerning licensing	the state and local ordinances and/or leashing?				
Have you, or any me family/household be or cruelty to animals	en cited for leash law violations				
If YES please specif	·y:				
Please tell us how you and its programs	ou became aware of Zeus' Place				
I/We attest that the Terms and Conditions of Adoption as stated below have been read in full by me/us and I/w understand that is part of the adoption process and will be enforced. I/we attest that the information provided of this application is true and accurate to the best of my/our knowledge. I/we attest that we have retained a copy of the Terms and Conditions of Adoption and also understand that completion and submission of this application does not guarantee adoption of a pet from Zeus' Place.					
Applicant's NAME:			Date:		
Co-applicant's NAME:			Date:		

Please save the file and email your completed Adoption Application to our Adoption Coordinator, **info@zeusplace.com** and to the Petfinder Contact listed for each dog you are interested in.