



Gadsden County Humane Society

P.O. Box 1268
Havana, Florida 32333
www.gadsdenhumane.org
(850) 539-0505



DOG ADOPTION QUESTIONNAIRE

Today's date: _____ Dog Name: _____

Your Name: _____ Your Age: _____

Address: _____ County: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail Address: _____

Own home? _____ OR Rent? _____ If you rent, does your landlord allow pets? _____

Landlord's Name: _____ Phone: _____

How long have you lived at your current address? _____

Do you live in a house? _____ Apartment? _____ Townhouse? _____ Mobile Home? _____

Do you have a fenced yard? _____ Describe type and height of fence: _____

How many people live in your household? _____ Any under 18? _____ If so, ages? _____

Are there any college students living in your household? _____ If so, how many? _____

Does your family or roommate support the decision to bring a new dog into your home? _____

Why do you wish to adopt a dog? _____ companion _____ for children _____ security dog _____ gift
_____ other (please explain) _____

Over the past five years, how many pets have you owned? _____

How many dogs in the past five years? _____ How many of the dogs were spayed/neutered? _____

How many cats in the past five years? _____ How many of the cats were spayed/neutered? _____

How many dogs do you currently own? _____ Breeds? _____

If you already have a dog, does he/she get along with other dogs? _____

If you are seeking to adopt a puppy, have you ever had a puppy before? _____

How many cats do you currently own? _____ Do the cats get along well with dogs? _____

What happened to those animals you no longer own? _____

List any other types of pets you own (including any exotics): _____

GCHS DOG ADOPTION QUESTIONNAIRE, pg. 2

If you own or have owned a dog, which heartworm preventative do/did you use? _____

Which vaccinations do/did your pets receive? _____

Who is your veterinarian? _____

May we contact your veterinarian for a reference? _____ If no, why not? _____

Will you provide necessary medical attention for your new pet, including annual checkups, required vaccinations, monthly heartworm prevention, and flea treatment? _____

Are you aware of local ordinances regarding leash laws and rabies vaccinations? _____

Have you ever participated in a dog obedience/training class? _____

IMPORTANT: Are you willing to commit to keeping your new pet for the animal's lifespan? _____

Will you be able to keep your pet if you move? _____ Move back in with parents? _____

Graduate from college? _____ Get married? _____ Have children? _____ Get divorced? _____

Where will your new dog spend most of its time? _____ outside OR _____ inside OR _____ both

Where will your new dog sleep at night? _____ outside OR _____ inside OR _____ both

Will you tie or chain your new dog outside? _____ If so, please explain: _____

Have you ever given away a pet, sold a pet, or taken a pet to a shelter? _____

If yes, please explain: _____

Have you ever euthanized a pet? _____

If yes, please explain: _____

Have you ever received a warning or been charged with or convicted of animal abuse, neglect, or dog fighting? _____

Have you ever had an animal removed because of abuse or neglect? _____

Have you ever bred animals to sell? _____

If yes, please explain: _____

GCHS requires a home visit before finalizing a dog adoption. May we visit your home to verify any of the above information? _____

May we visit your home after the adoption to check on your new pet? _____

If I am allowed to adopt this dog, I _____ agree to contact GCHS if I am unable to keep my new dog for any reason. I also verify that the above information is correct and understand that any falsification of information will result in the adoption not being finalized.

Signature: _____ Date: _____