

# EMPORIA ANIMAL SHELTER

## Request to Adopt Application

(Applicant must be 18 years of age or older)

Application Date \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ DOB \_\_\_\_\_  
Address \_\_\_\_\_ Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

1. Do you rent or own?  
a. If rent, what is your landlord's name and phone number? \_\_\_\_\_  
First & Last \_\_\_\_\_ Phone \_\_\_\_\_  
b. Does your lease permit pets?

2. Are you adopting for?      Yourself      Family Member      Someone Else

3. What type of pet are you looking for?      Dog      Cat      Puppy      Kitten      Other

4. Which pet are you currently interested in? \_\_\_\_\_

5. Do you own any pets at this time?  
a. If yes, how many?      Dogs      Cats      Other  
b. \_\_\_\_\_ Shots Current?      Spayed/Neutered?  
Name      Breed  
c. \_\_\_\_\_ Shots Current?      Spayed/Neutered?  
Name      Breed  
d. \_\_\_\_\_ Shots Current?      Spayed/Neutered?  
Name      Breed  
e. \_\_\_\_\_ Shots Current?      Spayed/Neutered?  
Name      Breed

6. My veterinarian is: \_\_\_\_\_  
First and Last Name      Address      Phone

7. Name veterinarian account listed under (if different from name on application):

\_\_\_\_\_  
First and Last Name      Address      Phone

8. Where do your pets live?      9. Is your yard fenced?

10. When my pet is outside, shelter will be provided by?

**I understand that sterilization of the adopted animal within two (2) weeks, unless otherwise stated, is required by Kansas State Law.**

*This form must be completed and on file at the Emporia Animal Shelter for a minimum of 24 hours before an animal may be adopted or removed from the shelter. This application will be valid for 6 months from the date of application. If a suitable animal is not adopted or located in this time period, the application will be removed from further consideration and a new one must be completed.*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

-----OFFICIAL USE ONLY-----

\_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_  
Date      Signature