



AANT is a Non-profit 501 (c) (3) Association

Dog Adoption Application

Welcome to AANT's adoption program. We request the following information so that we can assist you in the selection of a new dog. This form and a consultation with an AANT representative are designed to help you find the dog most compatible with your lifestyle. Please complete this form and e-mail it to us at animaladvocatesofnorthtexas@ymail.com

To be considered for adoption you must:

- Be 21 years of age or older
- Have identification showing your present address
- Have the knowledge and consent of your landlord (if applicable)
- Be able and willing to spend the time and money necessary to provide medical treatment and proper care for the dog.

Name of Animal: _____

Name of applicant _____ Date _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

How long have you lived at this address? _____

Are you adopting for yourself or someone else? _____

Describe in detail the type of dog you are looking for?

What pets have you owned in the past? _____

Which of these pets do you still own? _____

Have they been spayed/neutered? () Yes () No () Don't know

Are they current on vaccinations? () Yes () No () Don't know

What happens to the pets you no longer have? _____

Have you ever turned a cat into a shelter? () Yes () No If yes, please explain:

Have you ever had a pet euthanized? () Yes () No If yes, please explain:

If you have pets will they adjust to a new pet in the house? () Yes () No () Don't know

Why do you want to adopt a dog?

() Companion for family () Companion for other pet () Guard Dog

() Other: _____

How many adults are in the family? _____ Children? _____ Children's ages? _____

Does anyone in your household have any allergies to dogs? () Yes () No () Don't know

How many hours a day will your dog be alone? _____

Where do you live? () House () Apartment () Condo () Mobile Home () Other

If you rent may we contact the owner to obtain permission for this dog to live in your home?

() Yes () No Owner's name and phone number: _____

What is your current occupation? _____ Employer name _____

Does your job require extensive travel? () Yes () No

Fence in the yard? () Yes () No If yes: () Wood () Metal () Other: _____

Where will your dog live? () Indoors () Outdoors () Indoors and Outdoors

Do you have screens on your windows? () Yes () No

Do you have a cat/dog door? () Yes () No If yes, where does it lead to?

Will you keep your dog current on vaccinations? () Yes () No

Who is the current veterinarian? _____ Phone number _____

If you go away for a few days, who will care for your dog? _____

What arrangement will you make for the care of your pets in case of an emergency or if you are no longer able to care for her/him? _____

If you move, will you take the dog with you? () Yes () No

Have you ever applied to AANT before to adopt an animal? () Yes () No

If yes, when? _____

Have you ever brought animals to AANT or another rescue group? () Yes () No

If yes, please explain? _____

How did you find out about AANT? _____

Are you willing to have an AANT representative come to see where the dog will be living?

() Yes () No If no, please explain why?

Are you aware that dogs can live 15-20 years and are you willing to take responsibility for this dog for the next 15-20 years? () Yes () No

Additional comments from applicant: _____

Please provide a personal reference:

Name of reference: _____ Relationship to this person _____

Phone number: _____ City _____ State _____

E-mail Address: _____

