



Tobacco Valley Animal Shelter

## Adoption Form

\_\_\_\_\_  Cat  Dog  Male  Female  
Animal's Name                      Age                      Color

\_\_\_\_\_ Phone \_\_\_\_\_  
New Owner's Name

\_\_\_\_\_  Own  Rent  
Mailing Address                      City, State, Zip Code

\_\_\_\_\_ Physical Address

\_\_\_\_\_ How did you hear about us?  
E-mail

Do you have other pets?  Yes  No  
If so please describe \_\_\_\_\_

Are they spayed/neutered?  Yes  No      Current on their vaccines?  Yes  No

Do you have a fenced yard?  Yes  No      Where would pet live?  Inside  Outside

Do you have children?  Yes  No      What are their ages? \_\_\_\_\_

May we visit your home prior to adoption?  Yes  No

Have you adopted from us before?  Yes  No

\_\_\_\_\_ What is the reason for adopting this particular animal?

Personal References

\_\_\_\_\_ Phone \_\_\_\_\_  
Name

\_\_\_\_\_ Phone \_\_\_\_\_  
Name

I agree that the above information is accurate. I understand that adopting this animal means that I am accepting ownership and **Friends of the Shelter/Tobacco Valley Animal Shelter** is no longer responsible for this animal or any care that may be needed in the future. I also agree that if for any reason, I am unable to care for this animal, I will surrender it back to FOS/TVAS at which time they will agree to re-accept responsibility

\_\_\_\_\_ Date \_\_\_\_\_  
Signature

Office use only      Fee Paid \$ \_\_\_\_\_      Date \_\_\_\_\_

Notes: