

Date of Approval: \_\_\_\_\_  
Receipt Number: \_\_\_\_\_  
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## CRESTON PET ADOPTION & WELFARE SOCIETY

Box 253,  
Creston, B. C. V0B 1G0  
Phone: 250-428-7297

Email: [paws@kootenay.com](mailto:paws@kootenay.com) Website: [www.paws-crestonbc.org](http://www.paws-crestonbc.org)

### PET ADOPTION APPLICATION

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#### PART A - DESCRIPTION OF PET

Which pet are you interested in adopting? \_\_\_\_\_  
Paws Tag No. \_\_\_\_\_ Microchip No. \_\_\_\_\_

If you are not interested in a specific pet, please indicate what type and characteristics you are most interested in (eg. Age, gender, personality, breed. . .)

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#### PART B - APPLICANT INFORMATION

Date: \_\_\_\_\_

Full Name (please print): \_\_\_\_\_

Residential Address (and zip code): \_\_\_\_\_

Mailing Address (and zip code): \_\_\_\_\_

Phone - Home: \_\_\_\_\_ Work: \_\_\_\_\_

Email address: \_\_\_\_\_

Age group: Under 18 \_\_\_\_\_ 18-30 \_\_\_\_\_ 30-60 \_\_\_\_\_ 60 + \_\_\_\_\_

Name of Veterinarian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

What type of building do you live in (ie. house, apartment, etc.)? \_\_\_\_\_

Do you Rent \_\_\_\_\_ Own \_\_\_\_\_

If you rent does your landlord know that you plan to adopt a pet? Yes \_\_\_\_\_ No \_\_\_\_\_

Landlord contact information: \_\_\_\_\_

Where will the pet be housed?

Indoors \_\_\_\_ Outdoors \_\_\_\_ Other (please explain):

Do you have a yard that is fenced securely enough to contain small and large pets?

Approximate size: \_\_\_\_\_ Type of fencing: \_\_\_\_\_

If you do not have a fenced area how do you intend to exercise the pet and allow it to eliminate?

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Does everyone in your household agree with adopting a pet? Yes \_\_\_\_ No \_\_\_\_

Is any household member allergic to animals? Yes \_\_\_\_ No \_\_\_\_

Is any household member afraid of animals? Yes \_\_\_\_ No \_\_\_\_

Does any household member smoke? Yes \_\_\_\_ No \_\_\_\_

Do you have children? \_\_\_\_\_ Number \_\_\_\_ Ages \_\_\_\_\_

How much contact with the children will the pet have?

Frequent \_\_\_\_ Occasionally \_\_\_\_ Seldom \_\_\_\_

How would you describe your child(ren's) behavior around animals?

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Have you owned pets before? Yes \_\_\_\_ No \_\_\_\_

What happened to those pets?

Describe any other pets you may have now:

Are they spayed/neutered? Yes \_\_\_\_ No \_\_\_\_

Do you support spaying and neutering? Yes \_\_\_\_ No \_\_\_\_

Why do you want to adopt "this" pet? \_\_\_\_\_

Are you adopting this pet for yourself? Yes \_\_\_\_ No \_\_\_\_

If please explain who the main caregiver will be: \_\_\_\_\_

Please name two (2) **non-related** personal references who **do not share** your premises that we may contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

Are your neighbors aware that you are intending to adopt a pet? \_\_\_\_\_

Do any of them have a problem with this? \_\_\_\_\_

Have there been any problems in the past with neighbors and pets in the area? \_\_\_\_\_

If yes please explain reason, outcome, etc. \_\_\_\_\_

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**RELEASE OF LIABILITY AND INDEMNIFICATION**

I/WE, (Name, address and telephone number): \_\_\_\_\_

\_\_\_\_\_

**HEREBY AGREE TO THE FOLLOWING:**

1. To care for this pet humanely (including providing adequate food, water, shelter, love and attention). Pet **shall not** be left outside to roam at will.  
(initial) \_\_\_\_\_
2. This pet will not be isolated. It shall not be confined to a pen, room, basement or other enclosure.  
(initial) \_\_\_\_\_
3. This pet shall be loved, respected, and included in its family circle.  
(initial) \_\_\_\_\_
4. To give reasonable protection of this pet from the uneducated behaviour of children and adults, and conversely, of children and adults from this pet. I understand and acknowledge that this pet has been tested for dog/cat aggression and will be sensitive and diligent regarding the safety of other animals and people: and that I will assume all risks associated with this assessment.  
(initial) \_\_\_\_\_
5. To vaccinate with necessary inoculations as local ordinances require.  
(initial) \_\_\_\_\_
6. To provide necessary and essential veterinary care, as required.  
(initial) \_\_\_\_\_
7. To notify the Creston Pet Adoption and Welfare Society if this pet becomes lost or stolen.  
(initial) \_\_\_\_\_
8. To have this pet spayed/neutered within 4 months of adoption if not already done (i.e. pet was too young to spay/neuter when adopted).  
(initial) \_\_\_\_\_
9. Not to sell, trade or dispose of this pet. If, at any time, I/We are unable OR unwilling to care for this pet, I/We agree to contact and return said pet to Creston Pet Adoption and Welfare Society.  
(initial) \_\_\_\_\_
10. This pet shall not be euthanized without first contacting Creston Pet Adoption and Welfare Society, except under extraordinary circumstances.  
(initial) \_\_\_\_\_
11. This pet shall not be euthanized for reasons of behaviour.  
(initial) \_\_\_\_\_
12. The adoption fee of \_\_\_\_\_ (\$\_\_\_\_\_) DOLLARS will not be refunded after 10 days from the adoption date. I/We also agree that the Creston Pet Adoption and Welfare Society will keep 25% of the adoption fee, if the pet is returned within the 10-day period.  
(initial) \_\_\_\_\_
13. That this pet shall not be used for medical or any other experimental purposes or sold or given to a pet store, supplier or wholesaler.  
(initial) \_\_\_\_\_

14. That we will notify the Creston Pet Adoption and Welfare Society within 10 days of any change of address or phone number.  
**(initial)** \_\_\_\_\_
15. It is also understood that the Creston Pet Adoption and Welfare Society cannot be held responsible for any health or temperament problems that may develop following the finalization of the adoption of this pet.  
**(initial)** \_\_\_\_\_
16. It is further understood that the Creston Pet Adoption and Welfare Society may visit, examine and/or make inquiries about this pet at any time. If not satisfied with the condition of the pet or the conditions in which it is kept, this pet can or may be removed immediately and placed in a different home. Any veterinary services needed due to negligence or lack of care will be the responsibility of the adopter and payable to the Creston Pet Adoption and Welfare Society.  
**(initial)** \_\_\_\_\_
17. This pet shall not be transferred to any other person without written permission of the Creston Pet Adoption and Welfare Society. We may very well approve of a new family if you must give up your pet for any reasons, but we must screen them just as we screened you, and the new family must sign our adoption agreement.  
**(Initial)** \_\_\_\_\_
18. If a situation arises where the adopter can no longer keep a pet obtained from PAWS, with a signed Pet Adoption agreement, and given a reasonable amount of time, PAWS will either rehome or reclaim the pet.  
**(Initial)** \_\_\_\_\_
19. This pet shall not be transferred to any other person without written permission of the Creston Pet Adoption and Welfare Society. While we may approve of a new family if you must give up your pet for any reasons, we must screen them just as we screened you, and the new family must sign our adoption agreement. If necessary PAWS will work with the adopter to re-home the pet.  
**(Initial)** \_\_\_\_\_

**I/We promise and agree to be solely responsible for this animal, and to indemnify and hold harmless the Creston Pet Adoption and Welfare Society from any and all claims of liability for the conduct of this animal on or after the date of this adoption.**

**This Release of Liability and Indemnification shall apply to all known, unknown and anticipated damages resulting from my/our adoption, ownership and control of the said pet.**

**I/WE HEREBY ACKNOWLEDGE that I/We have read and understand the above terms and conditions and will keep the pet described herein as a family member, with all the rights and privileges attached.**

**Home Check date:** \_\_\_\_\_ **Conducted by:** \_\_\_\_\_

**Reference Checks date:** \_\_\_\_\_ **Conducted by:** \_\_\_\_\_

**SIGNED:**

**Creston Pet Adoption and Welfare Society:**

\_\_\_\_\_

**Per:** \_\_\_\_\_

\_\_\_\_\_

**Per:** \_\_\_\_\_