



**Humane Society & Adoption Center  
of Rockport-Fulton**

1308 Myrtle Street, Fulton TX 78358  
P.O. Box 1502, Fulton TX 78358  
(361)729-8186

**Applicant Information**      **Animal interested in**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_ **City/State/zip** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City/State/Zip** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**# of Adults** \_\_\_\_\_ **# of Children and ages** \_\_\_\_\_

**Do you**  **Qwn**  **Rent**    **Do you currently reside in a**  **House**  **Apartment**  **Condo**  **Trailer/RV**

**If renting, please provide Landlord Name and phone #** \_\_\_\_\_

*\*Renters, landlord will be contacted for approval prior to any adoption.*

*We welcome adopters who rent, or live in an apartment or condo. We want to alert you that some landlords and or management companies have limits on size, weight, breed or number of pets, and may require a pet deposit.*

**Vets Name** \_\_\_\_\_ **Vets Phone** \_\_\_\_\_

*Current and past pet history*

<b>Pets Name</b>	<b>Cat or Dog</b>	<b>Spayed/Neutered</b>	<b>Current on Vaccinations?</b>	<b>Still have or What happened?</b>
		Y/N		
		Y/N		
		Y/N		

**I give my permission for the Humane Society & Adoption Center of Rockport-Fulton to request and verify records from my veterinarian.**      **Initials** \_\_\_\_\_

**Type of fence**  **None**  **Chain Link**  **Wood**  **Invisible**  **Other**    **Fence Height** \_\_\_\_\_

**Is someone home during the day?**  **Yes**  **No**    **How many hours will the animal be alone?** \_\_\_\_\_

**When you are not home, where will the animal stay?** \_\_\_\_\_

**How do you plan to exercise your pet?** \_\_\_\_\_

Have you ever had to re-home a pet? If so, why? \_\_\_\_\_

We are committed to positive reinforcement training. Can you continue with the same approach? Y N

Do you understand that an animal's behavior in the shelter may be different than the behaviors exhibited in the home?  Yes  No

It may take your new pet six weeks or longer to adjust to your home, sometimes longer if other pets are involved. Are you prepared to allow this much time to adjust?  Yes  No

The average annual financial cost of a healthy dog typically is \$1000 to \$1200 per year.

Would you object to an inspection of your property by our staff?  Yes  No

Please provide the name and phone # of the person or persons who will take responsibility for your pet in case of a major life altering event such as: household changes, illness, or death.

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

I understand that if I have to return my pet to HSAC, I agree that I will pay a surrender fee of at least

\$50.00. **Signed by:** \_\_\_\_\_ Date \_\_\_\_\_

I understand that this is an adoption, not a sale, and the HSAC of Rockport-Fulton reserves the right to refuse or rescind any adoption. I understand that if approved, I will have 3 days to pick up the animal unless prior arrangements have been made.

Signing below, I certify that the information I have given is true and that any misrepresentation of facts may result in my losing the privilege of adopting a pet.

**Signature:** \_\_\_\_\_ Date \_\_\_\_\_

Application Taken By: \_\_\_\_\_

**Official Use Only**

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Vet records verified  Yes  No Date \_\_\_\_\_ By \_\_\_\_\_

Landlord called  Yes  No Date \_\_\_\_\_ By \_\_\_\_\_

Home Visit Required  Yes  No

Results of home visit \_\_\_\_\_

Notes \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Shelter Manager \_\_\_\_\_