

Pre-adoption Form

Welcome to Tupelo-Lee Humane Society We are glad you have come to adopt an animal from our shelter. We want to insure high compatibility between animal and adopter. Please answer the questionnaire completely. Thank you!

Name: _____ **Email Address Required :** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Home/Cell Phone: _____ **2nd Phone Required:** _____

I am interested in adopting: Name: _____

I live in a: Mobile Home Duplex Condo Apartment House

I Own/Rent: Landlord's Name: (Required) _____
Phone: _____

My family consist of: Number of Adults: _____ Number of Children: _____ Age(s): _____

How will your pet reside? (Circle all that apply): Inside Outside Crated/Kenneled Garage Porch Fenced Yard
Tethered/Chained Barn Locked in a room

Current Animal(s) Living in the Household

List all animals you currently own or live with.

Animal Name	Breed	Sex	Age	Spay/Neuter	Vaccinations	Heartworm Prevention?	Reside?	How long have you owned the animal?
1 _____	_____	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No Inside/Outside _____
2 _____	_____	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No Inside/Outside _____
3 _____	_____	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No Inside/Outside _____
4 _____	_____	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No Inside/Outside _____
5 _____	_____	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No Inside/Outside _____
6 _____	_____	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No Inside/Outside _____

Veterinarian Information

Vet Clinic Name: _____
Phone: _____

Are your current pets up to date on vaccinations, heartworm preventative, flea and tick preventative, etc? YES NO

I have concerns/would like more information on the following regarding this animal (circle all that apply): Size
Temperament Hair Obedience Energy Level Housetraining
Other: _____

For cat adoptions: Are you planning on declawing your cat? YES NO

I hereby certify that all the answers and statements made in the foregoing agreement are true and correct. I understand that giving false answer or statement may be grounds for denying an adoption or for revoking or rescinding an adoption. TLHS may send an officer to your home to verify conditions.

Adopters Signature (Required) _____

Date _____

For Shelter Staff ONLY

Date/Time Received _____ **Initials** _____ **Approved: Yes / No**