NFAWL ADOPTION APPLICATION

NAME:	AME: DATE: IONE #: ALTERNATE #:			
PHONE #:				
Which pet(s) are you interested in adopting?				
How did you hear about the Riverhead or S	Southold Animal shelte	r?		
Do you personally know someone that is af	filiated with the Riverh	ead or Southold shel	ter? Who?	
STREET ADDRESS :	APT:	TOWN:	ZIP:	
MAILING ADDRESS:	APT:	TOWN:	ZIP:	
EMAIL ADDRESS :				
SPOUSE'S NAME:				
OCCUPATION (SELF): EMPLOYER'S NAME: PHONE #: OCCUPATION (SPOUSE): EMPLOYER'S NAME: PHONE #:				
ABOUT YOUR HOUSEHOLD:				
Do you live in a HOUSE – APARTMENT	CONDOTRAILE	R—OTHER?		
Do you (Check one): Own Rent	Live with Parents/Fa	amily/Friends	-	
Are the people you live with okay with you intend to adopt?	adopting an animal?	Do they know	that you	
If you rent have you talked to your landlord	l about getting an anima	al?		
Does your landlord have any breed or weigh	ht restrictions?			
HOMEOWNER\LANDLORD'S NAME: HOMEOWNER\LANDLORD'S PHONE	: E#:			
Are there kids in your household?	How many:	Ages:		
Is anyone in your household allergic to pets	? YES:	NO:		
Have you adopted from a shelter before? If	so what shelter?			

VET CARE

Who is your primary vet?	_Phone #
How long have you been using this vet?	
Whose name is the account in at your vet?	
Which of your pets has this vet seen?	

Do you have a secondary vet? What is their name/phone #?_____

WHAT YPES (S) OF PETS DO YOU OWN OR HAVE OWNED IN THE LAST 10 YEARS?

					STILL ALIVE?	UP TO DATE ON RABIES AND
NAME	TYPE/BREED	AGE	SPAYED/NEUTERED	GENDER		DISTEMPER VAX?

DAY TO DAY CARE OF THE PET(S):

How many hours will the pet be left alone?

Where will the animal be kept when left alone? (Crate/Loose/Gated off area)

How will you provide for your pets exercise and elimination needs?

Are you willing to give the animal time to adjust to its new home (It could be weeks, even months)?

Are you willing to consult with our trainer before returning a pet for behavioral issues?

Do you agree to accept FULL financial responsibility for all vet care for your pets lifetime?

Do you agree to let a NFAWL representative visit your pet in its new home?

Have you ever had to surrender an animal to a shelter or rehome before? If so, why?

PERSONAL REFERENCES: None Family Members if possible

NAME	PHONE #	RELATIONSHIP TO YOU
#1		
#2		
#3		

I understand that completion of this application does not guarantee that you will be approved for the adoption of this pet. WE ARE THE ANIMALS' ONLY VOICE and need to ensure that we place him or her in the home that is best suited for the animal (Initial)_____

FOSTER WITH INTENT TO ADOPT

By **LAW**, rescues cannot adopt out an animal that is not spayed/neutered. Therefore, if the animal you are interested in adopting is not fixed at the time you bring him/her home this application will be considered a **FOSTER WITH INTENT TO ADOPT (FIA)** application. An FIA's responsibilities include bringing the animal to our veterinarians at our cost when

- Vaccines are due
- The animals **ASSIGNED** spay/neuter date arrives
- The animal is in need of **ROUTINE** medical attention **EXCLUDING** an injury or illness that occurs while in your care

The adoption will **not** be finalized **until** the animal is spayed/neutered. Should you fail to bring your animal in for the assigned spay/neuter date NFAWL retains the right to take possession back of the animal.

******While an animal is in our Foster with intent to adopt program ownership resides FULLY with NFAWL. Only after the animal is altered and the adoption fee is paid will ownership be transferred to you****** (Initial)_____

I have read, understand, and agree to the Foster with intent to adopt section in in entirety (Initial) _____

I will contact NFAWL FIRST before scheduling any vet visits through an approved NFAWL vet (Initial)

If I bring an (FIA) animal to my own personal vet, I understand that NFAWL will not cover any costs related to the visit (Initial)

Applicants Signature:		Date:
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The North Fork Animal Welfare League is a non-profit animal welfare organization, which operates the Riverhead and Southold Animal Shelters. The League provides dogs and cats with food, shelter, medical care (vaccinations, de-worming, heartworm tests, Feline Leukemia Virus and Feline Immunodeficiency Virus and other preventative and curative treatments, as necessary), spaying or neutering, as applicable, etc. (and love!). NFAWL is under Town Contract to provide Dog Control Services for the Towns of Riverhead and Southold. Dog adoption and license fees are payable to The Towns of Riverhead and Southold. New York State does not license cats. NFAWL rescues and cares for cats through the support of voluntary donations. Adoption fees are set at a minimum level to accommodate adoptions by persons of limited means. We request that if it is not a hardship you make an extra contribution at the time of adoption payable to NFAWL so that we may continue our work with the homeless cats and dogs of Riverhead and Southold Town and provide them with the care they deserve.

FOR OFFICE USE ONLY

PET SHOWN BY: DATE:

COMMENTS:

APPLICATION PROCESSED BY: DATE:

APPLICATION APPROVED [] APPLICATION DENIED []

If denied, please state reason(s):

Riverhead Animal Shelter North Fork Animal Welfare League riverhead.manager@nfawl.org

631-765-1811 Ext 2