

9. Please list any other pets you have had within the last 12 to 15 years. _____

10. Have you ever had to give up a pet? Yes No (If yes, please explain.)

11. How many people live in your home? _____ Adults _____ Children* (Ages) _____

*Will your children have a role in caring for this pet? _____

12. Is anyone in your home allergic to pets? Yes No Don't know

13. Where will the pet you adopt spend its days? _____ nights? _____

14. Do you have a doggie door? If so, where is it located, and to where does it lead?

15. If you travel, where will your pet stay? Who will care for your pet(s)?

16. Name of your veterinarian(s) or pet clinic: _____

17. Do you give NMAF permission to call your vet for a reference, if needed? Yes No

If you are adopting a dog:

18. Do you have a fenced yard? Yes No *If so, please describe the yard, the fence and gate.*

19. If you have had dogs in the past, have they received obedience training? Yes No

20. If you're adopting a dog, are you interested in taking him to obedience classes? Yes No

If you are adopting a cat:

21. If you're adopting a cat, are you planning to declaw him/her?

Yes No Don't know Maybe

22. Does your home have screens on all windows? Yes No On all patio doors? Yes No

23. Where will litter box(es) be kept? _____ How many litter boxes total? _____

24. If you have other cats, have they been tested for feline leukemia and feline immunodeficiency virus (FIV)? Yes No Don't know/not sure

I the undersigned hereby affirm that the information I have given above is true, complete, and accurate.

Signature of Applicant