



DOG ADOPTER SURVEY/ADOPTION APPLICATION

The following questionnaire will help in determining which pet is the best match for you.

Date: _____

First, Last Name	Address	Apt or Unit #	City/State/Zip	
Home Phone	E-mail address		Work Phone	Cell Phone
Are you 18 years of age or older?	Drivers License or ID			
Secondary/Emergency Contact	Phone #(s)			

1	I have owned a dog before.	YES	NO			Currently own dog(s)
2	The last time I had a dog was...	2-10 years ago	10 years +			Not currently, but within the past year
3	My dog needs to get along with other dogs.	NO	If yes, list names, ages, genders and breeds: _____			Yes
4	My dog needs to be good with: (circle all that apply)	Children over 8 years old	Children under 8 years old	Elderly People		Cats Animals other than dogs and cats
5	My dog will primarily be an....	Inside dog				Outside dog
6	How many hours will your dog spend outside per day?					_____ hours
7	My dog needs to be able to be alone (per day)	4 hours or less	8-10 hours	4-8 hours	2 hours or less	12 hours
8	When I'm at home, I want my dog to be by my side...		All of the time	Some of the time	Little of the time	
9	When I'm not at home, my dog will spend her time...	In the garage In a crate in the house		In the yard		Loose in the house Confined to one room in the house
10	I want a guard dog.	NO				YES
11	I want my dog to hunt or herd with	NO				YES
12	I want my dog to be the type that is very enthusiastic in the way she shows she loves people.		Not at all	Somewhat	Very	
13	I want my dog to be playful.		Not at all	Somewhat	Very	
14	I want my dog to be laid back.		Very	Somewhat	Not at all	
15	I am comfortable doing some training with my dog to improve manners such as jumping, stealing food, and pulling on the leash.		No training	Some training	A lot of training	
16	I (or my children) want to participate in Agility, Flyball or Obedience with our dog			NO	YES	
17	I am interested in a dog with "special needs" (medical or behavioral)			NO	YES	

18 It's most important to me that my dog _____

FOR OFFICE USE ONLY		PURPLE	ORANGE	GREEN	
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Animals Living With You NOW and in the PAST

<p align="center">Pet #1</p> <p>Name: _____ Sex: _____ Age: _____ Type/Breed: _____ How Long Owned: _____ Is/was animal spayed/neutered? _____</p> <p>Most of the time this pet is/was kept: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both Does this pet still live with you? If no-please check appropriate box: <input type="checkbox"/> Deceased <input type="checkbox"/> Gave Away <input type="checkbox"/> Lost <input type="checkbox"/> Other: _____</p>	<p align="center">Pet #2</p> <p>Name: _____ Sex: _____ Age: _____ Type/Breed: _____ How Long Owned: _____ Is/was animal spayed/neutered? _____</p> <p>Most of the time this pet is/was kept: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both Does this pet still live with you? If no-please check appropriate box: <input type="checkbox"/> Deceased <input type="checkbox"/> Gave Away <input type="checkbox"/> Lost <input type="checkbox"/> Other: _____</p>
<p align="center">Pet #3</p> <p>Name: _____ Sex: _____ Age: _____ Type/Breed: _____ How Long Owned: _____ Is/was animal spayed/neutered? _____</p> <p>Most of the time this pet is/was kept: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both Does this pet still live with you? If no-please check appropriate box: <input type="checkbox"/> Deceased <input type="checkbox"/> Gave Away <input type="checkbox"/> Lost <input type="checkbox"/> Other: _____</p>	<p align="center">Pet #4</p> <p>Name: _____ Sex: _____ Age: _____ Type/Breed: _____ How Long Owned: _____ Is/was animal spayed/neutered? _____</p> <p>Most of the time this pet is/was kept: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both Does this pet still live with you? If no-please check appropriate box: <input type="checkbox"/> Deceased <input type="checkbox"/> Gave Away <input type="checkbox"/> Lost <input type="checkbox"/> Other: _____</p>

How did you hear about this animal or our shelter?

I certify to the best of my knowledge, that all the above information is true.

Signature _____ **Date** _____

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<p align="center">DOG ADOPTION FEES</p> <p>Date In _____ Animal # _____ Breed _____ Color _____ Sex _____ Altered? Yes No Age _____ Weight _____</p>	<p>Adoption Fee \$125.00 <input type="checkbox"/></p> <p>Rabies Vacc Needed <input type="checkbox"/> (3 months or older only)</p> <p>License County <input type="checkbox"/></p> <p>License City* <input type="checkbox"/> **(Moorpark, Oxnard)</p>
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Adoption Counselor, Print Legibly _____

Approved Officer, Print Legibly _____

Your cat or dog will be microchipped. **Microchip #** _____

The microchips are automatically registered to new adopters if a Trovan microchip is implanted.

If checked, your new pet has been microchipped prior to entering our shelter with a chip other than the Trovan chip we implant. Your microchip will only be on file with Ventura County. Information to register, as owner, with the manufacturer will be provided to you at time of payment.