



Brookings Regional Humane Society
1027 Main Ave, South -Brookings, SD. 57006
(605) 697-7387
brookingsregionalhumanesociety@hotmail.com
www.brookingshumane.org

SMALL-ANIMAL ADOPTION APPLICATION

Name: _____ Primary Phone: _____

Alternate/Cell Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Check one: Own Rent: Landlord's name and phone: _____

Employer: _____ Are you over 18? _____

This pet is for: Yourself Children Family Other: _____

This pet will be: Companion Hunter Farm Other: _____

This pet will be: Indoor Outdoor Both (explain): _____

Does anyone in your home have animal related allergies? _____

If so, are you willing to spend the money on allergy treatments? _____

Do you plan to move in the future? _____ If so, will this animal be able to move with you? _____

What will happen to this pet when you go on vacation or in case of emergency? _____

What type of enclosure do you have for your pet? _____

How will you exercise your pet? _____

How much time will you spend with your new pet? _____

How many hours a day, on average, will this pet be alone? _____

Will someone be home to house train, if necessary? _____ Do you know how to do this? _____

How do you plan to discipline your pet? _____

Have you ever adopted from a Humane Society or Animal Shelter before? _____ When? _____

Do you still have that animal? _____ If no, why not? _____

Have you had other pets during the last five years? _____ If so, what kind? _____

Do you still have that animal? _____ If no, why not? _____

Have you ever given up an animal? _____ If so, why? _____

Were past pet(s) sterilized? _____ If no, why not? _____

What other pets do you have now? _____

Are they sterilized? _____ If no, why not? _____

Are your pets current on all vaccinations? _____

Your veterinarian's name, address and phone number: _____

I agree as part of the adoption agreement with the Brookings Regional Humane Society:

Please read and initial

_____ I agree that I will not permit this animal to be used for breeding.

_____ I agree to provide the proper food, water and shelter for this pet, and to give it the necessary attention to make it a healthy, happy animal.

_____ I agree to provide veterinary care for this animal in case of illness and injury and if I am unable to do so to surrender it to the Brookings Regional Humane Society, Inc.

For this reason, IF I DO NOT PROVIDE FOR THE HUMANE CARE NECESSARY FOR THE WELL-BEING OF THIS ANIMAL AND THE SOCIETY REQUESTS ITS RETURN BECAUSE OF VIOLATIONS OF THIS AGREEMENT, I WILL RELINQUISH THE PET, MAKING NO CHARGES FOR EXPENSES OR CARE.

Signed _____ Date _____

APPROVED BY (Need two BRHS signatures including one member of Adoption/Foster Committee)

Signed _____ Date _____

Signed _____ Date _____