



CARRIE A. SEAMAN ANIMAL SHELTER
PROVINCETOWN

Carrie A. Seaman Animal Shelter
5 Sandy Hill Lane
PO Box 1374
Provincetown, MA 02657
508.487.4243
www.casasanimalshelter.org

Dog Adoption Information

Thank you for considering adopting a shelter animal. This form is designed to assist you in selecting a pet that is suitable for you, your family, and your lifestyle; and also to provide information so that your household is prepared for this adoption. In order for the adoption to be successful, it is essential for every member of the household to be aware of the responsibilities involved. In order to be considered for a dog adoption, you must:

- Acknowledge the adoption fee (see below) *as well as a lifelong financial commitment for the life of your dog.*
- Agree to keep the dog leashed or under your control at all times.
- Be 21 years of age or older and have a current form of photo identification.
- If you rent, provide your landlord's name and number—we will call to verify that dogs are welcome.
- Have your veterinarian's name and number—we will contact them.
- Understand that a member of the CASAS Adoption Committee must approve your application.

Adoption fees:

Puppies and young dogs (under one year of age): \$150.00

Adult dogs (one to ten years old): \$100.00

Senior dogs (over ten years old): \$75.00

Adoption fee includes:

Veterinary examinations

Fecal parasite testing and treatment

Age appropriate vaccinations

Sterilization (spay or neuter)

If your application for adoption is accepted, you may be asked to provide an appropriate dog carrier to take your dog home. You will also need to obtain the services of a veterinarian to establish a schedule of preventive medicine. If the dog becomes ill within one month of adoption, you should contact CASAS immediately. Adoption fees are not refundable.



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Name of Applicant:		Home Phone:	
Partner/Spouse Name:		Work Phone:	
Mailing Address:		Cell Phone:	
		Email Address:	
Physical Address: (if different from mailing address)		Place of Employment:	

1) If you are applying to adopt a specific dog:

Name of dog:		Tracking number:	(CASAS fills this in)
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2) If you have specific characteristics that you are seeking in a dog, please indicate.

Sex:		Breed:		Size:		
Age:		Temperament:		Other:		

3) Why are you interested in adopting a dog? Please circle all that apply:

Family pet	Pet for child	Companion for self
Recent loss	Gift	Companion for other pet
Other (please explain)		

4) Is there anyone in your household who does not know about this adoption?

4a) If yes, who?

5) Is there anyone in your household who has allergies?

5a) If yes, to what?

Note: if answer to Question 5 is yes, you must have a note from doctor stating that person is not allergic to dogs.

6) How many other people live in the house?

6a) If children, how many?

6b) And if children, what are their ages?

7) Is there anyone in your household who does not know about this application?

7a) If yes, who?

8) Who will be primarily responsible for the daily care of this dog?

9) How many hours each day will the dog be left alone?

9a) When home alone, where will the dog stay?

10) At night, where will the dog sleep?

11) How will you handle urination or other training problems should they occur?

12) How will you handle scratching and/or destruction should they occur?

13) What other pets do you have now?

Name	Type of Animal	Age	Spayed/Neutered?	Vet's Name & Phone

14) What other pets (not listed) have you had in the last 5 years?

14a) What happened to them?

15) Do you plan on using the same vet that you have used in the past?

15a) Vet's name, address and phone number:

Name: _____ Phone Number/s: _____
 Address: _____

16) How much do you expect to pay annually for pet care (veterinary care, medicine, food, toys, etc.)?

17) What percentage of the time will the dog spend inside?

18) Have you ever given up a pet in the past?

19a) Why?

19) What will happen to the dog if you move?

20) Which best describes your housing? Please circle:

Apartment Condo Single family home Other (describe): _____

21a) Do you rent?

21b) If so, does your landlord allow pets?

21c) Please provide the name, address and phone number of your landlord:

Name: _____ Phone Number/s: _____
Address: _____

21) How long have you lived at the current residence?

22a) If less than 5 years, how many times have you moved in the last 5 years?

22) When you travel, who will take care of the dog?

23) Please list two references that are familiar with you and your pets.

Name: _____ Phone Number/s: _____
Address: _____

Name: _____ Phone Number/s: _____
Address: _____

24) Are you willing to allow a CASAS representative visit your home?

25) Are you willing to comply with our policy which states that if at any time you are unable to keep the dog, you agree to immediately contact CASAS?

26) Are you prepared to pay our adoption fee and to accept financial responsibility for the care of your new dog? (Please refer to the attached "Dog Budget" document.)

By signing below, I am attesting to the truthfulness of my answers. I understand that falsification of any of the above information will be grounds for rejection of this application and possible removal of the dog from my home. I consent to CASAS representatives discussing information contained in this application with any persons named on this application and with local Animal Control Officers. CASAS reserves the right to refuse any applicant without furnishing a reason.

Signed: _____ Date: _____

For Official Use Only

Interviewed by: _____ Date: _____

Adoption Approved/Declined: _____

Comments: _____

