COLUMBUS Humane

Small & Exotic Adoption Application

Thank you for your interest in adopting from Columbus Humane! We are excited to help you find an animal to join your family. Please take a moment to complete the following information and return this form to an Adoptions Counselor or matchmaker volunteer when you are finished.

Name: _____ Date: _____
First Last

Address: _____
Street City State Zip

Home Phone: _____ Alternate Phone: _____

Email Address: _____

Animal's Name: _____ ID # _____

Are you at least 18 years of age? YES NO

Do you own or rent your home? OWN RENT

Please provide the name & phone for your landlord: _____

Have you had an animal like this before? When and for how long? _____

How many adults and children currently live in your home? _____ Adults _____ Children

Does anyone in your home have allergies to animals? YES NO

Does everyone in the home agree with getting a new pet? _____

Who will be primarily responsible for caring for this pet? _____

How many and what kinds of pets are currently in your home? Please list them.

_____

_____

Who is your *current* veterinarian? _____

When did you last visit your veterinarian? _____

How and where will you house your new animal? _____

_____

_____