



Date: _____

Thank you for choosing adoption! Please complete the following survey to help guide our conversation today.

What kind of animal are you interested in adopting? Cat Dog Both

Your Name(s): Mr./Mrs. _____

Address: _____ Town, State, ZIP: _____

Email: _____

Cell phone: _____ Home phone: _____

Best way to be reached by phone? cell home

Best time of day to be reached? morning afternoon evening

This pet is meant to be a gift. I am answering the following questions from the perspective of the lucky recipient. (please note that the recipient will have to meet the animal prior to adoption.)

We welcome adopters who rent, or live in an apartment or condo. We want to alert you that some landlords and management companies have size and breed restrictions, limits on number of pets, and/or require pet deposits or additional fees. Do you rent or own?

Tell us about members of the new pet's household (e.g., # of adults/seniors/young children):

Tell us about pets at home (check all that apply):

We have one or more dog(s) ages, breeds, sizes _____

We have one or more cat(s) ages _____

We have one or more small animal(s)

Other info you want to share?

What is your ideal pet? (Couch potato, jogging buddy, family pet, etc.)

We'll explain this new pet's medical history and behavioral history. Check additional topics you'd like to discuss:

- | | | |
|---|---|---|
| <input type="checkbox"/> Feeding this pet | <input type="checkbox"/> Finding a trainer | <input type="checkbox"/> Crate-training |
| <input type="checkbox"/> House-training/litter box training | <input type="checkbox"/> Introducing this pet to other pets | <input type="checkbox"/> Moving with pets |
| <input type="checkbox"/> Grooming/nail trimming | <input type="checkbox"/> Microchips and other ID options | <input type="checkbox"/> Pulling on-leash |
| <input type="checkbox"/> Exercise, toys and fun activities | <input type="checkbox"/> Finding a Veterinarian | <input type="checkbox"/> Flea/tick prevention |
| <input type="checkbox"/> Puppy/kitten-proofing your home | <input type="checkbox"/> Declawing | <input type="checkbox"/> Heartworm prevention |

Other questions: _____

Extra services and opportunities; check any you are interested in:

- | | |
|---|--|
| <input type="checkbox"/> Buy a crate with this adoption (if available) | <input type="checkbox"/> Information about volunteering or fostering with us |
| <input type="checkbox"/> Information on our low-cost vaccination program for any current pets | <input type="checkbox"/> Information about supporting us with financial or in-kind donations |
| <input type="checkbox"/> Information about our low-cost spay and neuter services and other veterinary services at our Wellness Center | <input type="checkbox"/> Information about our training classes |

How did you find out about us? _____

This Survey will stay on file for 90 days after completion if you do not find an animal that is suitable for your home.