

**Bisbee Animal Shelter  
Adoption Application**

938 S Tovreaville Rd.  
Bisbee, AZ 85603  
520-432-6020  
bisbeeanimals@gmail.com

Name of Dog/Cat: \_\_\_\_\_ Gender: \_\_\_\_\_ Breed: \_\_\_\_\_

Animal Number: \_\_\_\_\_

Primary Adopter(s) Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Place of

Employment: \_\_\_\_\_

1. Why are you interested in adopting this dog/cat?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you live in a: House / Apartment / Other: \_\_\_\_\_

3. Do you own; rent; or lease? \_\_\_\_\_

- If you rent, Please provide landlord's name and phone # :

\_\_\_\_\_

4. How long have you lived at your current address? \_\_\_\_\_

**Family & Home  
Environment:**

1. Please list the names and phone numbers of any other adults in household: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Are they in agreement with adopting? \_\_\_\_\_

2. How many children are in the household?

\_\_\_\_\_

- Ages of children:

\_\_\_\_\_

3. Please circle which energy level best describes your home: Active Average Quiet

4. Is anyone in the household allergic to cats or dogs? \_\_\_\_\_

5. What other pets do you have in household: (please be specific, i.e number of pets, age breed/species)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Are all pets in the household up to date on vaccines? \_\_\_\_\_

7. Are all pets in the household spayed/neutered? \_\_\_\_\_

- Are you able to provide proof for the above? \_\_\_\_\_

**8. Have you ever surrendered a pet?**

\_\_\_\_\_

- Why?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9. Have you had any animals in the past?**

\_\_\_\_\_

- If they are no longer with you, please share what happened:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10. How will you discipline the dog/cat?**

\_\_\_\_\_  
\_\_\_\_\_

**11. Will the dog / cat be indoors or outdoors** \_\_\_\_\_

**12. Where will the dog/cat be at night?** \_\_\_\_\_

- During the day? \_\_\_\_\_

**13. Do you have a fenced in yard?** \_\_\_\_\_

- How tall is the fencing? \_\_\_\_\_

**14. Who will take care of the dog/cat in your absence?**

\_\_\_\_\_  
\_\_\_\_\_

**15. What will happen to the dog/cat if you have to move?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**16. Past or current veterinarian:** \_\_\_\_\_

- Phone #: \_\_\_\_\_

**17. Are you financially able and willing to provide annual checkups, vaccinations and any**

medical care necessary?

\_\_\_\_\_

19. In the event that you are no longer able to care for the dog/cat, do you agree to return the dog/cat to the Bisbee Animal Shelter? \_\_\_\_\_

20. If adopting a cat, do you intend to have the cat declawed? \_\_\_\_\_

21. Is there anything else you would like us to know before processing your application?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Personal References: (Please list 3 people who do not live in your current household and at least one non-relative)**

**Name:** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

*I understand that completion of this application does not guarantee approval of adoption- adoptions are NOT first come first served, but are based on what is the best fit for the animal. I certify that all the information in this application is true. I understand that false information may void this application. I also understand that failure to comply with the completed adoption contract could result in my inability to adopt another animal.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_