



Noah's Ark Animal Foundation

PHONE: 641-472-6080 • FAX: 866-289-0897 • PO BOX 748 • FAIRFIELD, IOWA 52556 • WWW.NOAHSARK.ORG

ADOPTION APPLICATION

Name of dog/cat you wish to adopt: _____ Date: _____

Thank you for your interest in adopting from Noah's Ark Animal Foundation. By choosing adoption you are saving a life. Our goal is to ensure the best possible match for adopters and the animals, so that they can remain in their new homes for life.

APPLICANT INFORMATION

Last Name: _____ First Name: _____

Spouse/Roommate/Partner Last Name: _____ First Name: _____

Address: _____ Apt/Unit #: _____

City: _____ State: _____ ZIP: _____ County: _____

Primary Phone: _____ Alternate Phone: _____

Email Address: _____

HOUSEHOLD INFORMATION

Do you own or rent

Type of Property: House Condo/Townhouse Apartment Mobile Home

Apartment Landlord/Complex Name: _____

Apartment Landlord/Complex Phone: _____

Are you planning to move in the next six months? Yes No

If yes, what will you do with your pet? _____

Are there any children living in the household? Yes No Ages: _____

Does anyone in the household have allergies to animals: Yes No

If yes, how do you plan on managing this issue? _____

PET OWNERSHIP

Why do you want to adopt this pet: _____

How many pets do you currently have in your household:

Cats: _____ Breed(s): _____ Spayed/Neutered: Yes No Ages: _____

Dog: _____ Breed(s): _____ Spayed/Neutered: Yes No Ages: _____

Other: _____ Types: _____ Ages: _____

Have you ever adopted from Noah's Ark? Yes No If yes, where is this pet now? _____

Have you ever surrendered an animal to an animal shelter? Yes No

If yes, why? _____

Where will this pet live? Indoors Outdoors Both

Are you aware that food, pet supplies, medical expenses, if necessary, could be substantial? Yes No

It may take your new pet 4-6 weeks or longer to adjust to its new home.

Are you prepared to allow this much time? Yes No

Are you willing/able to spend the time to housetrain your new dog/cat? Yes No

*Cats: How do you plan on handling your cats' need to scratch? _____

What reasons might cause you to return this pet? _____

Do you have any questions about adopting, or about the dog/cat you are interested in? _____

Please review the following adoption policies and information. After reading each item, place your initials in the box next to it.

- Thirty-Day Return Policy:** All pet adoptions are given a thirty (30) day period during which time you may return the pet and receive a full refund of the adoption fee.
- 24PetWatch Gift Insurance:** Adopters who provide a valid email address at the time of adoption are eligible for 30 days of pre-paid pet health insurance from 24Petwatch. Adopters must confirm/activate the gift within 7 days of the adoption date. Coverage begins the 2nd midnight following activation.
- Microchip Implant:** All cats and dogs are implanted with a microchip for identification purposes. When the adoption is processed, the microchip is registered to the adopter. The microchip provides a permanent, positive identification for your pet.
- Declawing Prohibited:** You agree not to have the cat declawed understanding that declawing is a painful amputation of the first joint of the cat's toes.
- No Liability:** You agree that Noah's Ark Animal Foundation is not liable to you or any other party for any losses, injuries, damages, costs, expenses, liabilities, lawsuits or judgments whatsoever in connection with your adoption or ownership of the dog/cat.
- Ownership agreement:** As the new owner, you agree to take full responsibility for the care and well-being of this pet for its lifetime. After the adoption is finalized, you will be responsible for all medical bills and decisions regarding this animal.
- If you are unable to care for this dog/cat,** you agree to return it to Noah's Ark Animal Foundation.

By signing below, I certify that the information I have given is accurate and complete and I have read, understand and agree to abide by the above mentioned policies.

Your name (print): _____ Date: _____

Your signature: _____

Noah's Ark Representative: _____ Date: _____

**We reserve the right to refuse any pet adoption.*

NOTE: Noah's Ark accepts adoption fees in the form of cash or personal check (sorry, no credit cards). Thanks.

For Shelter Use. Application approved _____ Comments _____

Fee received: Cash _____ Check _____ Amount _____ Date _____