

Cocheco Valley Humane Society

Small Companion Animal Adoption Application

Name/Type of Pet						
Type of Pet Desired:	Rabbit Guir	nea Pig Har	nster Rat	Mouse	Other	
What is the reason for a Companionship Br			-	For the		Gift
Your Name		Driver's	License #			
Street/ PO Box		Home Pl	hone #			
City	2	Zip Code	Work	Phone #		
Type of Housing: Rer	nt apartment	Rent House	Own House	e Other	r	
If you rent, what is you	ır landlord's nam	ne?		Phone #		
Number of adults in ho	usehold: N	Number of child	dren in househo	old	Children	's ages_
Does anyone have aller	rgies to animals?	? If yes, w	vhat kind of an	imal allergy	r?	
Who is your veterinaria	-					
			City _			_
Please list animals pres	ently in your ho	ousehold.				
Species	Sex	Age	How long	g owned	Where	Kept
Have you ever owned t	he kind of pet y	ou wish to ado	pt? If yes	, how long a	ago?	
What happened to the p	pet?					
Did the pet ever have o						
How will you house yo			-	-		
	-	-			-	e)
Where will your pet be	kept? . Outside	In Garage	Covered of	outside area	In hou	ise
Who will be responsibl	e for your pet's	care?				

Are you familiar with this pet's needs for: Food/wa	ater Socialization/Exercise	
Vet Care		
Do you have a preference for breed, age, sex?		
Signature	Date	
Comments:		
Pending Vet Check	Approved (Counselors Int.)	