

Radnor Outreach & Animal Rescue
PO Box 89
Southeastern, PA 19399
484.380.5255
www.radnoranimalrescue.org
info@radnoranimalrescue.org

ADOPTION APPLICATION

What animal are you interested in adopting? _____

Personal Information (please print):

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home/Cell Phone: _____ Work Phone: _____

Household Information:

How many humans live in your home?

Adults over the age of 21 (including self): _____ Ages: _____

Children (under 21): _____ Ages: _____

Does anyone in the household have pet allergies: YES NO

If yes, please describe: _____

Which best describes your residence:

HOUSE APARTMENT CONDO DUPLEX

MOBILE HOME TOWNHOME

Do you: OWN RENT LEASE

How long have you been at this address? _____

If renting/leasing, are there pet restrictions? YES NO

If yes, what are they? _____

Landlord's name: _____

Landlord's phone #: _____

If renting, we will contact your landlord to ask if bringing companion animals into your home is acceptable. You will not be able to adopt until we receive positive confirmation.

Please list all of your current pets:

Dog/Cat/Other: _____

Breed: _____

Name: _____

Age: _____

M/F: _____

Spayed/Neutered: _____

How long have you been this pet's Guardian? _____

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Dog/Cat/Other: _____

Breed: _____

Name: _____

Age: _____

M/F: _____

Spayed/Neutered: _____

How long have you been this pet's Guardian? _____

.....

Dog/Cat/Other: _____

Breed: _____

Name: _____

Age: _____

M/F: _____

Spayed/Neutered: _____

How long have you been this pet's Guardian? _____



Dog/Cat/Other: _____

Breed: _____

Name: _____

Age: _____

M/F: _____

Spayed/Neutered: _____

How long have you been this pet's Guardian? _____



If you have more pets, please use the back of this application to document information.

Veterinarian's name and contact information:

Please notify your veterinarian's office that a ROAR representative will be contacting them to verify your pet is up-to-date on vaccines and care.

Who will be the primary caregiver of your new pet? _____

For Dogs:

Describe your yard: _____

ROAR dogs and puppies must be supervised at all times when outdoors.

How many hours during the AVERAGE day will this animal spend without a human?

Please tell us anything else you would like us to know to help match you with the right pet:

I certify all the information contained in this application is true and correct.

Signature

Date

Print Name

Submit application to info@radnoranimalrescue.org

Thank you for sharing your interest in helping homeless pets!