



Small Animal Adoption Application

Thank you for your interest in adopting! To aid our adoption counselors in determining if you are prepared to bring a new companion home today and to make the best match for you and your family, please submit completed form to info@spcawestchester.org.

Name (s) _____ Date _____

Address _____

City _____ State _____ Zip _____ Phone _____

Email _____ Are you over 21? Yes ___ No ___

Where did you hear about us? _____ I'm here to: Adopt Today Inquire

Personal Reference: Not a family member

Name _____ Phone _____ Relationship _____

Do you: Own Rent **Do you live in a:** House Townhouse Condo Apartment Other _____

What is your pet policy if any: _____

Landlord/ Management Company: Name _____ Phone _____

Number of people in your household? Adults (18+) _____ Children _____ Ages of Children _____

Has anyone in your household ever experienced animal-related allergies? Yes ___ No ___

Are all household members in agreement with this adoption? Yes ___ No ___

Who will be responsible for your animal's day-to-day care? _____

When traveling, how will you provide for your animal? _____

Are you currently employed? Yes ___ No ___ How many hours will the animal be left alone for daily? _____

Did you know it costs about \$600-1,300 per year to provide basic care for a healthy small animal?!

Are you financially prepared to provide for the health and wellness of your new animal? Yes ___ No ___

If you are unable to continue to care for the animal, who will take over care? _____

Have you ever rehomed a pet? Yes ___ No ___ If yes, why? _____

Under what circumstances would you not keep a new pet?

Divorce Illness in Family Moving New Baby New Job Shedding

Odors Have No Time For High Vet Costs Allergies None

Current Household Pets

Species/Breed	Age	Sex	Altered?	Vaccinated?	Veterinarian Info Hospital _____ Phone _____

I'm looking for a: Rabbit Ferret Hamster Guinea Pig Lizard Other: _____

Is it your first time adopting this type of animal? Yes ___ No ___

Are you familiar with this animal's diet and basic needs? Yes ___ No ___

Please circle the option you feel best suits you and your home.			
The activity in my home is like:	A Library (calm & quiet)	The Beach (at times quiet, other times a lot going on)	An Amusement Park (constant activity, lots of people in and out)

Describe housing/enclosure you plan to use for the animal: _____

Small animal housing and enclosures need daily cleaning. Are you ok with this? Yes ___ No ___

Can you keep the animal separate from other pets if needed? Yes ___ No ___

How much human contact and attention will this animal receive daily? _____

What behaviors are you not willing to work with?			
Litterbox problems	Biting	Unsocial/Dislikes Handling	Eats Live Prey
Other _____			

Please let us know if you have any questions or concerns below:

Internal Use Only:

Safe space ___ Medical ___ Litterbox Training ___ Enrich & Exercise ___

Contact for concerns ___ Diet ___ Appropriate Enclosure/Housing ___ Handling ___