



SMALL ANIMAL ADOPTION QUESTIONNAIRE

Must be 18 years of age or older

Please complete the worksheet so that we can better assist you in finding a new best friend!

Our goal is to find the best home for every animal in the least amount of time. THERE ARE NO HOLDS ON ANIMALS.

NAME(S): _____ **PHONE:** _____

MAILING ADDRESS: _____ **City:** _____ **State:** _____ **Zip:** _____

PHYSICAL ADDRESS (if different from mailing address): _____

EMAIL: _____ **DRIVER'S LICENSE #:** _____
(required for free pet insurance offer)

Please tell us about the type of animal you are looking for (check all that apply):

energetic	affectionate	likes other pets
lazy	goofball/playful	quiet & shy
outdoor animal	independent	needs me/has special needs
indoor animal	likes small children	mature/Senior
social butterfly		

Tell us a little bit about yourself and your household including people who live with you, other pets, your lifestyle, and anything else you'd like us to know about you!

I/We give permission for my/our veterinarian to release my/our pet's veterinary records, including vaccination history; heartworm/FIV/FELV testing, treatment, prevention; and illness/injury treatment.

SIGNATURE: _____ **Date:** _____

VET OFFICE: _____

PET NAME(S): _____

Other names/addresses vet records may be under: _____

I/We give GMHS permission to contact my landlord (name) _____ at (phone) _____ to discuss any limitations or restrictions regarding pet adoption.

SIGNATURE: _____ **Date:** _____