



Helping Hands Humane Society
Application for Adoption – Pit Bull & American Bulldog

Last Name	First Name	Date
Street Address		
City	State	Zip Code
Email	Phone	Work Phone
Occupation		Date of Birth

By checking YES, you agree that the dog will not be used for any illegal activities nor found at any time in a municipality where the breed is illegal.

Yes

No

By checking YES, you agree that the dog is to be used as a house pet. It shall not be used for medical or any other experimental purpose and it shall not be used for breeding.

Yes

No

Do you prefer an adult or puppy? <input type="checkbox"/> Adult <input type="checkbox"/> Puppy <input type="checkbox"/> Either	Do you prefer a male or female? <input type="checkbox"/> Male <input type="checkbox"/> Female	Do you have a color or weight preference of your new pet?
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Do you own or rent your home? <input type="checkbox"/> Homeowner <input type="checkbox"/> Renter	If you are renting, please provide your landlord's name and phone number	Describe your yard:
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Choose the type of structure that best describes your home:

House
 Apartment
 Townhouse
 Duplex
 Mobile Home

Tell us in a few words what you know and how you feel about Breed Specific Legislation:	
Do you have Breed Specific Legislation in your city? If so, please describe the restrictions or ordinance:	
Please list all household members including their age, sex and relationship to you. (Ex: Mary 12 years old, daughter)	
What other pets do you currently own? Please be specific with age, sex, breed or type. Please provide the name and phone of their veterinarian.	
Tell us about the pets you have owned in the past including what happened to them if they are no longer with you.	
Have you ever had to rehome a pet? If so, please explain the circumstances.	
What traits would you find unacceptable in your new pet?	What steps would you take to correct unwanted behavior?

What circumstances would prevent you from keeping a dog for the rest of its life?		
What will you do if you cannot keep your dog?		
Are your current pets sterilized? <input type="checkbox"/> Yes <input type="checkbox"/> No	If your pets are not spayed/neutered, please tell us why:	
Where are your pets kept while you are at work or when you leave the house?	Where will your pet be kept at night?	Do you travel for business or vacation? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you travel for business or vacation, who will provide for your animals while you are away?		
What kind of activities do you or will you do with your pets for fun and exercise?		
What restrictions would you place on a child's interactions with your dog?		
Please describe any experience you have had with the breed of dog you are interested and please explain why you are interested in the breed.		
Have you thought about and are you prepared to deal with the discrimination that may come from owning a bully breed of dog (homeowner's insurance, neighbor relations, community bias)?		

References – Please supply the name of at least 3 references who may attest to your character and who are NOT related to you.

Name	Phone	Relationship
Name	Phone	Relationship
Name	Phone	Relationship

Please provide any additional information you would like us to know about your home, family and why you are applying to adopt a dog from us:

Signing below, I certify that the information I have given is true and that any misrepresentation of such may result in my losing the privilege of adopting a pet. I understand Helping Hands Humane Society has the right to deny my request to adopt an animal. I authorize the investigation of all statements in this application. I authorize the request of all veterinarian records by Helping Hands Humane Society. I understand this application is the property of Helping Hands Humane Society.

I CERTIFY THE ABOVE INFORMATION IS TRUE AND CORRECT

Signature	Date
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For Office Use Only

LL Approval Date	Adoption Counselor	
Pending Approval Information		
Spay/Neuter Verification:	Veterinarian Appointment Date	
Approved	Denied	Denial Reason

Adoption Counselor please initial