



Montgomery County Animal Shelter

8535 Highway 242, Conroe, TX 77385
936-442-7738 Fax 936-442-7739



Application

<input type="checkbox"/> Foster Home	<input type="checkbox"/> Foster To Adopt	<input type="checkbox"/> Adoption
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This form is to help us help you find the best match for you and the animals awaiting adoption.
For all Programs you must:

- o Show current identification showing present address.
- o Must be at least 18 years of age.
- o Have permission from your landlord or own your own home.

Your name: _____ Co-Applicant Name: _____

Address: _____ TX Drivers License _____

City, State, Zip Code: _____

Phone #s with area codes: Home: _____ Work: _____

Cell: _____ E-mail address: _____

Why would you like to adopt a pet? _____

Home life

How many pets do you have presently? _____ Dogs _____ Cats _____ Others, _____

Do you live in an: _____ Apartment _____ House _____ Mobile Home _____ Other: _____

How long have you been at your current address? _____

Do you rent or own your home? _____ How Long? _____

If you rent, what is your landlord's name and phone number? _____

If you move, what would you do with your pets? _____

Name(s) of other adult(s) in the household _____

Do you have any children living in your home? _____ Yes _____ No.

If yes, please list their names and ages: _____

Current pets

Name	Type of animal	Age	Indoor/Outdoor?	Time in your care	Spayed/Neutered
_____	_____	_____	_____	_____	Yes _____ No _____
_____	_____	_____	_____	_____	Yes _____ No _____

If you have more pets, please continue on the back.

Do your pets have their vaccinations? ___ Yes ___ No

How often do they go the veterinarian? _____

Past Pets

Please tell us about any pets you have had within the last 5 years who are no longer living with you. (Feel free to continue on the back of the page.)

Name	Age	Reason no longer with you	Spayed/Neutered
_____	_____	_____	Yes ___ No ___
_____	_____	_____	Yes ___ No ___

If you have ever lost a pet at an early age or due to an accident or illness, please let us know what happened: _____

Have you ever given up a pet? _____ If yes, where did the animal end up?

___ Found new home ___ With family member, former partner, or roommate ___ Took to shelter
___ Called Animal Control to pick up Other _____

Veterinary care

Name & phone number of your veterinarian: _____

Name & phone number of other veterinarian you have used within the past 5 years (if any):

Are you financially able and willing to provide annual checkups, vaccinations? ___ Yes ___ No

Would you be able to provide emergency veterinary care for the pet if needed? ___ Yes ___ No

Will you provide monthly heartworm preventative? ___ Yes ___ No

Cat's Activities (skip if not applicable)

Will the cat go outdoors? ___ Yes ___ No.

If yes, please check all that apply to the cat's outdoor activity:

___ supervised ___ unattended sometimes ___ unattended most of the time
___ in a cat enclosure ___ in a fenced yard ___ with a collar with an ID tag

Describe the area and street where you live: _____

If your cat gets lost, what would you do? _____

Do you want to declaw your new cat? ___ Yes ___ No ___ Undecided

Why or why not? _____

How long are you willing to allow the new cat to adjust to his/her new home:

What will you do if your new cat does not get along with your present companion animals?

Dog's Activities (skip if not applicable)

Where will the dog spend time? Check all that apply: ___ in the house ___ in a crate
___ in a fenced yard ___ on a tether or chain ___ walked on a leash ___ with me at work
___ in a kennel ___ running free ___ garage or basement ___ other locations - please describe:

Describe the area and street where you live: _____

Where will the dog ride in your vehicle? _____

Will your dog have a collar with an ID tag? ___ yes ___ no ___ maybe

Do you know about dog licensing requirements in your area? ___ yes ___ no ___ will find out

If your dog gets lost, what would you do? _____

How long are you willing to allow the new dog to adjust to his/her new home?

What will you do if your new dog does not get along with your present companion animals?

Do you plan to take your dog to obedience classes? ___ yes ___ no ___ maybe

Long-term Care

Will you be able to arrange care for your pet when you travel? _____

A pet can be expected to live 10 to 20 years. Are you willing to make a lifetime commitment to this pet?

Adoption Promotion

How did you hear about pet adoptions at Montgomery County Animal Shelter? (check all that apply)

___ Newspaper article ___ Newspaper ad ___ Magazine ___ Radio ___ TV ___ Poster ___ Friend
___ Off-site adoption ___ Phone books ___ Website ___ other _____

Did a special promotion make a difference in your decision to adopt a pet now? ___ yes ___ no

Agreement

By signing this form, I acknowledge that all information on this form is true and correct. I understand that any misrepresentation of fact may result in MCAS refusing adoption privileges to me. I authorize MCAS to contact all veterinarians listed on the application and the landlord if applicable. If my request for adoption is approved and later MCAS discovers the above information is not true or correct, MCAS reserves the right to remove the adopted pet from my home.

Signature: _____ Date _____

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