

Kindred Souls Foundation Adoption Application

Name	Home Phone	Work Phone
Physical Address	Cell Phone	Email
Occupation	Employer	
Name (co-applicant)	Home Phone	Work Phone
Email Address	Cell Phone	
Occupation	Employer	

Type of Dwelling House Apartment Condo Other _____

How long have you lived at your current address? _____

Do you Own Rent Live with friends/relatives

Landlord's Name _____ Phone Number _____

Are there any pet restrictions in your place of residence? No Yes

If Yes, please specify _____

How many people live in the home? _____

Please list the ages of the people living in the home under 17 yrs: _____

Do you plan on moving in the next 12 months? Yes No

Are you looking to adopt an animal currently available or to be placed on a Wait List for a specific type of animal?

currently available cat/kitten dog/puppy (Name _____)

Wait List cat/kitten dog/puppy (Specifications: _____)

How much money do you expect to spend on this animal companion each month?

\$0-\$25 \$25-\$50 \$50-\$75 \$75-\$100 \$100+

Please list the animal companions currently in your home:

<u>Type of Animal</u>	<u>Sex</u>	<u>Spayed/Neutered</u>	<u>Age</u>	<u>Indoor/Outdoor</u>	<u>Vaccinated</u>
	M F	Yes No		Indoor Outdoor	Yes No
	M F	Yes No		Indoor Outdoor	Yes No
	M F	Yes No		Indoor Outdoor	Yes No
	M F	Yes No		Indoor Outdoor	Yes No
	M F	Yes No		Indoor Outdoor	Yes No

This animal companion will be indoors only indoor/outdoor outdoor only Unsure

How will you keep your animal companion confined to your property?

Fenced yard Dog Run Stake in Ground Trolley Other (please specify)

How many hours a day will your animal companion(s) spend without a human companion?

Where will your animal companion(s) be while you are away from home during the day?

Where will your animal companions sleep at night?

Where will your animal companion(s) stay should you go on vacation or have an emergency?

Are any members of the household allergic to animals? Yes No Unknown

If Yes, then how will this be accommodated?

If adopting a cat, then do you intend to de-claw? Yes No Unsure

Please provide three personal references who can share with us your commitment to animals

Name _____ Phone _____


Name _____ Phone _____


Name _____ Phone _____


Please tell us why you wish to adopt an animal companion


Adoption Contract

By signing this Adoption Contract through Kindred Souls Foundation, I am agreeing to provide the animal companion listed herein a holistic approach to care throughout his/her lifetime that includes the following:

 Physical needs met: routine medical care as determined by a veterinarian, medical attention for any special needs, a balanced diet, adequate exercise, proper shelter, and any other physical need that should arise

 Mental needs met: necessary socialization skills to be able to interact with other animals and people, basic commands to deter behavior problems, and any other mental needs that will help him/her get along in the world

 Emotional needs met: one-on-one nurturing, acceptance as a member of the family, unconditional love, and any other emotional need that elicits a purr or tail-wag

 Spiritual needs met: play-tailored to his/her preference, consistent companionship, and any other spiritual need that strengthens his/her soul

Should I be unable at anytime to continue to care for my animal companion, I agree to contact Kindred Souls Foundation who will welcome him/her back with open arms.

Printed Name

Signature

Date

Printed Name (co-applicant)

Signature

Date