



ADOPTION APPLICATION

#		
DOG	CAT	OTHER

Name: _____
 Physical Address: _____ City: _____ Zipcode: _____
 Mailing Address: _____ City: _____ Zipcode: _____
 Home #: _____ Work #: _____ Cell#: _____
 Emergency Contact Person: _____ Phone #: _____
 Email: _____
 DOB: _____ ID Type & #: _____

- Homeowner
- Renter (circle one) House Apartment Condo Duplex Parents/Relatives/Guardian

Name of complex: _____
 Landlord/Property Management Company Name: _____ Phone #: _____
 Animals currently live on my property. Yes No
 Someone in my home is allergic to animals. Yes No
 Number of people living in my home:
 Adults: _____ Children under 6: _____ Children 6 and over: _____
 Children regularly visit my home. Yes No
 The children who live/visit my home have the following experience handling animals:

Issues I am NOT comfortable dealing with:
 House/Litter Box Training Obedience Training Socializing Scratching Barking/Crying Chewing
 Jumping Shyness/Fear Digging/Destructiveness Climbing on furniture Too Active Not Active

I would like to have my cat FeLV/FIV tested for \$30. Yes No Adopter's Initials: _____

MHS strongly advises you have your cat tested prior to adoption.

I would like my cat to have a microchip for \$30. Yes No

I would like my dog's microchip to be registered nationally for \$20. Yes No

I am adopting this pet for:
 Companion for Self Companion for Child Companion for Other Pet Gift Security/Protection
 Hunting/Working Pet

Signature: _____ Date: _____

***NOTE: By signing above I hereby grant the Maui Humane Society access to the above listed physical address for a site visit and acknowledge that at the time of surgery a discreet tattoo will be placed in my animal's ear.**

