**Murray-Calloway County Animal Shelter**

**81 Shelter Lane, Murray, KY. 42071**

**Email:** [**mccasapplication@gmail.com**](mailto:mccasapplication@gmail.com) **(270) 759-4141**

**WHICH PET ARE YOU INTERESTED IN?**

**YOUR NAME: AGE:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Address (street, city, ST, zip) | | | | | | | | |
| Home Phone |  | | Cell Phone |  | | | Work |  |
| Email Address |  | | | | | | | |
| Place of Employment | |  | | | Position |  | | |

**Living Environment:**

**I currently own:** [ ]House [ ] Condo [ ] Trailer [ ] Other **For How Long?**

**I currently rent or lease:**

[ ] Apartment [ ] House [ ] Condo [ ] Trailer [ ] Other **For How Long?**

**If you rent or lease, do you have your landlord’s permission to keep a pet? [ ]Yes [ ]No**

**Landlord’s Name: Phone Number:**

**I currently live with friends or family:**

[ ] Apartment [ ] House [ ] Condo [ ] Trailer [ ] Other **For How Long?**

**Homeowner’s Name: Phone Number:**

**How many people live at your residence? What are their ages?**

**Where will your new pet live? (Please check all that apply.)**

[ ] Indoors only [ ] Indoors and outdoors w/Supervision [ ] Mostly Outdoors [ ] Outdoors

[ ] Barn [ ] Tied Outside [ ] Kennel [ ] Running Free [ ] Fenced Yard

**How many hours will your pet be unsupervised during the day?**

**Current and past pets**

If you have had a pet in the past, but have no pets currently, what happened to him/her?

Do you currently have pets? [ ] Yes [ ] No How many? Please list below or write on back.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Type/Breed** | **Sex** | **Age** | **Spayed/Neutered? If no, why?** |
|  |  |  |  | [ ]Yes [ ]No |
|  |  |  |  | [ ]Yes [ ]No |
|  |  |  |  | [ ]Yes [ ]No |

Do you have a vet for your pets? [ ]Yes [ ]No

Please give name and number of Clinic:

***I give my permission for MCCAS to contact my vet in order to verify that I have acted responsibly in the medical care for my pet(s) in consistency and am in good financial standing with the clinic. [ ]Yes [ ]No***

Are you aware that all animals adopted from MCCAS must be spayed or neutered with NO exceptions? [ ] Yes

What are you prepared to spend on your pet(i.e. food, vet care, grooming, misc.) per year?

Have you ever been accused or convicted of animal abuse or neglect? [ ]Yes [ ]No

Have you, or any members of your household, ever engaged in any type of animal fighting? [ ]Yes [ ]No

***I acknowledge that all of the information on the Entire Application is True and Correct. And, that I am applying to adopt this pet for myself and not for someone else. I will be the primary/responsible owner.***

***SIGNED: DATE:***

**We Reserve The Right, In Our Sole Discretion, To Refuse Any Applicant. It Is For The Benefit Of Our Animals. The MCCAS Appreciates Your Consideration For Wanting To Provide A Loving Home For An Animal In Need. 2/2020**