

Fulton County Regional SPCA, Inc.
117 West Fulton St. Gloversville, NY 12078
Application for Adoption



Please understand that not all families and dogs are compatible. Every effort is made to match traits exhibited by a dog with the characteristics you desire in a dog. Our goal is to ensure the welfare of the dog by placements in the best possible home.

To be considered as an adopter, you must:

- Be 21 years of age or older and have identification showing present address.
- Be willing and able to invest the time and money required to provide proper care for the dog. *The estimated annual cost to care for a healthy dog is over \$600.⁰⁰.*
- Be prepared to pay an adoption fee of \$195.⁰⁰. Adoption fees are non-refundable after fourteen days.
- Consent to reference checks and home visits.
- Complete application and sign required contracts upon acceptance of application.
- Understand that, if for any reason contractual obligations are not met, ownership of the dog will revert to Fulton County Regional SPCA, Inc. If for any reason the dog has to be “given up,” it is to be returned to Fulton County Regional SPCA, Inc.
- Submission of this application is not a guarantee of being approved to adopt any animal.

I agree to the considerations above:

Signature: _____

Date _____

This is a fillable PDF. Please return completed application and picture of license to contact@fcrspca.org

What is the name of the pet you are interested in adopting? _____

How did you hear about the adoption program? _____

Have you previously applied to adopt from a Rescue or Shelter? _____

Name _____ Driver's License: _____

Co-adopter Name _____ Driver's License: _____

Home Phone _____ Work Phone _____ Cell Phone _____

Address _____

City/State _____ Zip _____

Email Address _____

Place and address of Employer _____

Number of adults in household _____

Number of children _____ Ages of children _____

Does anyone have allergies? _____

Explain: _____

Do you Own Live with relative Rent- Landlord's name and telephone number:

If renting, do you have your Landlord's permission to have a pet? Yes No

Please provide proof of permission from your landlord.

Is a deposit required? Yes No

Amount of deposit required _____

Has the deposit been paid? Yes No

Do you live in a House Condo Apartment Mobile Home Townhouse?

What restrictions on size and/or number of pets apply in your subdivision or apartment complex?

Is there a breed restriction? Yes No

Do you operate a business in your home? Yes No

Animal Care Information

Why do you want to get a dog?

How long have you considered this decision? _____

Do all the adults agree to this adoption? Yes No

Who will be responsible for the care of this dog? _____

Where will the dog be kept during the day? _____ Night? _____

Where will the dog be kept when you go on vacation? _____

How many hours per day will the dog be left with no one home? _____

Where will it be kept when unattended? _____

Will this dog spend most of its time? Inside Outside

If outside, how many hours per day? _____

What type of food will you feed this dog? _____

Can you invest the time and effort to allow this dog to adjust to its new home? Yes No

How long seems reasonable for this? Please explain:

What reason(s) would cause you to give up the dog?

If you have to give up the dog, what will you do with it?

If the dog were lost, what would you do?

If this dog requires surgery or special care, what would you do?

How much would you spend on your dog in an emergency situation?

Please list the pets you now have in your household:

Name and Species	Fixed?	Sex	Age	Vaccines Current	Kept Where	Breed	Weight
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Please list the previous three pets you have owned:

Name and Species	Neutered	Kept Where	Time Owned	What happened to this pet?
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What Veterinarian(s) have you used in the past? _____

Date of last visit: _____

What Vet will you use for this pet?: _____

Dog Compatibility

Please explain why you picked the dog you are applying to adopt:

Do you want a dog for a: (mark all that apply) House Pet Watch Dog

Children's Pet Company for Another Pet Hunting Dog Fighting Dog Companion

Outside Dog Gift for: _____

If Watch Dog, explain: _____

Other: _____

What do you consider valid reasons for giving up a dog: (mark all that apply)

Moving Fleas Vet bills Destructive Biting Grew too big Digging Chewing Unable to train

Having a baby Barking too much/too little Too rough with children Other (explain below):

What will you do if the dog demonstrates the following behaviors?

Digging: _____

Chewing: _____

Not getting along with other pets: _____

Difficulty adjusting to household: _____

What preferences and personality traits are you wanting in a dog?

What breed of dog are you looking for?

Size/Weight: _____ Sex: _____

Color: _____ Hair Length: _____

Activity level: Low Medium High Playful Lap dog Laidback Outgoing

House-trained Good with children Quiet Past puppy stage Gets along with cats Other:

What traits do you consider undesirable?

Daily Care of This Dog

Where will this dog be kept? At home At work Both Other:

How will you keep this dog confined? (Mark all that apply) House Kennel Fence Chain Patio

Garage Leash Crate Other: _____

If crated or kenneled, how many hours a day? _____

Type and size of crate:

Do you have a yard? Yes No If yes: Partially fenced Open Completely fenced

If fenced: Type: _____ Height: _____ Condition: _____

Where will this dog be allowed to relieve itself?

You will probably have to house-train a new puppy. Please explain your method of house training:

With any new dog, there may be "accidents" during the adjustment period. How will you handle this?

How often will you exercise this dog? _____

Where and how will you exercise this dog? _____

How will you transport this dog? _____

Do you plan to take this dog to training classes, and if yes, what kind?

How would you prevent heartworms? _____

Are the dog(s) you have at home now (or was the dog you last owned) on a heartworm preventative?

No Yes – what type? _____

Dogs often live in excess of ten years. Are you prepared to assume responsibility for that long? Yes No

Are you familiar with: Parvovirus Distemper Bordetella Rabies Parasites

Is there anything else that you think is important or that you would like to add?

List three (3) personal references including phone numbers. You may list any previous shelters or rescue groups you have adopted from in the past.

I certify that the above information is true and correct. I understand that false information may result in denial of adoption and/or revocation of adoption. Fulton County Regional SPCA, Inc. reserves the right to approve or deny adoption to anyone for any reason. Fulton County Regional SPCA, Inc.'s main interest is in the well-being and proper placement of the dog. The submission of this application is not a guarantee of adoption.

****DO NOT FORGET DRIVER'S LICENSE AND SIGNATURE ON BACK OF PICTURE COPY.**

Signature of Applicant _____ Date: _____

Signature of Applicant _____ Date: _____

****Note:** You will be asked to show your driver's license and a copy will be made. For mail-in applications, please send a copy of the driver's license of all adults in the household.

Mail-in applicants, please copy a picture from the web site of the dog you are adopting and sign the back of the copied picture.

FOR COUNSELOR USE ONLY: APPROVED DENIED

DOG'S NAME _____ SHELTER NUMBER _____

BREED _____ COLOR _____ SEX _____ AGE _____

RABIES TAG NUMBER _____ MICROCHIP NUMBER _____

RABIES VACCINE INFO AND VET _____

DATE OF HOME VISIT _____ DATE OF ADOPTION _____