



# NORTHERN LIGHTS REGIONAL HUMANE SOCIETY

Adoption Fees Apply  
Adult Dog: \$400 Puppy: \$350  
Adult Cat: \$150 Kitten \$150

PO Box 481 High Level, AB T0H 1Z0  
(780) 926-5520 [shelter.nlhs@live.ca](mailto:shelter.nlhs@live.ca)

## DOG ADOPTION APPLICATION FORM

DATE: \_\_\_\_\_

<b>FULL NAME(S)</b>		<b>MAIN PHONE #</b>	
MAILING ADDRESS		EMAIL	SECONDARY PHONE #
PHYSICAL ADDRESS		PROVINCE	DATE OF BIRTH
CITY / TOWN		POSTAL CODE	LANDLORD CONTACT INFORMATION
DO YOU OWN OR RENT YOUR HOME? OWN      RENT      LIVE WITH PARENTS		LANDLORD OR MGMT COMPANY NAME	
HOW LONG HAVE YOU LIVED AT CURRENT RESIDENCY? _____ YRS _____ MONTHS		DO YOU HAVE THE LANDLORDS PERMISSION? YES      NO	WHAT IS THE LANDLORDS CURRENT PET POLICY?
DO YOU HAVE A FENCED YARD? YES (HEIGHT) _____ NO IF NO, OUTDOOR KENNEL AREA? _____ ESCAPE PROOF GATE?      YES      NO		LIVE IN      APARTMENT      CONDO      FARM      ACERAGE      HOUSE IN TOWN OTHER:	APPROPRIATE SIZE OF YARD FOR DOG?      YES      NO
NUMBER OF ADULTS IN THE HOME _____		NUMBER OF CHILDREN IN THE HOME 0-5 YRS _____ 6-12 YRS _____ 12-17 YRS _____	
NUMBER OF OTHER PETS IN THE HOME DOG _____ CAT _____ OTHER _____		DOES ANY FAMILY MEMBER HAVE ALLERGIES TO ANIMALS?      NO      YES, PLEASE EXPLAIN:	
IF YOU CURRENTLY HAVE OTHER DOGS BREED _____ SEX _____ SPAYED/NEUTERED BREED _____ SEX _____ SPAYED/NEUTERED BREED _____ SEX _____ SPAYED/NEUTERED BREED _____ SEX _____ SPAYED/NEUTERED  DO YOU HAVE ANY LIVESTOCK? YES      NO TYPE:		HAVE YOU PREVIOUSLY HAD OTHER ANIMALS?      NO      YES, WHAT HAPPENED TO IT:  HAVE YOU EVER SURRENDERED OR GIVEN AWAY AN ANIMAL?      NO      YES, PLEASE EXPLAIN:  HAVE YOU EVER BEEN CONVICTED OF NEGLECT OR CRUELTY TO ANIMALS?      NO      YES PLEASE EXPLAIN:	
THE DOG I AM INTERESTED IN APPLYING FOR		IS THIS DOG FOR      YOURSELF      SOMEONE ELSE      GIFT      OTHER	
WHAT AGE OF PET ARE YOU INTERESTED IN PUPPY      MIDAGED DOG      SENIOR DOG		HAVE YOU ADOPTED FROM THIS SHELTER OR ANOTHER SHELTER IN THE PAST      YES      NO	
BREED:		I PREFER A PET WHOSE ENERGY LEVEL IS      LOW      MEDIUM      HIGH	
SEX:      FEMALE      MALE		DO YOU AGREE WITH SPAY / NEUTERING THIS PET      YES      NO	
WHAT ARE THE TRAITS YOU MOST DESIRE IN A PET?			
DOES THE ENTIRE HOUSEHOLD AGREE ON THE ADOPTION OF THIS      YES      NO			
WHY ARE YOU LOOKING TO ADOPT      COMPANION      FOR KIDS      WATCHDOG      FARM DOG			
ARE YOU WILLING TO TAKE RESONSBILITY FOR THIS PET FOR THE NEXT 10-15 YEARS?      YES      NO PLEASE EXPLAIN:			
WILL YOU PROVIDE THE PET WITH THE NECESSARY VACCINATIONS FOR ITS LIFE TIME?      YES      NO			
HAVE YOU RESEARCHED THE BREED      YES      NO		WHO WILL BE RESPONSIBLE FOR THIS ANIMAL?	



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IF THE PET BECOMES ILL OR INJURED WILL YOU SEEK TREATMENT FROM A VET		YES	NO
ARE THERE ANY BAD HABITS THAT YOU CANNOT TOLERATE?			
WHAT REASONS WOULD CAUSE YOU TO SURRENDER THE DOG?			
APPROXIMATELY HOW MUCH DO YOU THINK YOUR DOG WILL COST A YEAR? VET/MEDICAL _____ FOOD _____ BOARDING _____ GROOMING _____ OTHER _____			
WHAT ARE YOUR EXPECTATIONS WHEN OWNING A DOG			
HOW LONG DO YOU THINK IT WILL TAKE YOUR FAMILY AND THE DOG TO ADJUST?			
WHERE WILL YOUR DOG BE WHEN YOU ARE HOME?			
WHERE WILL YOUR DOG STAY DURING HOLIDAYS / VACATION?			
WHERE WILL YOUR DOG BE WHEN YOU ARE NOT HOME?			
THE NOISE AND ACTIVITY LEVEL IN THE HOME		LOW	MEDIUM HIGH
ON AVERAGE, HOW MANY HRS/ DAY WILL YOUR DOG BE ALONE		1-4 HRS	4-8 HRS 8+ HRS
WHERE WILL THIS DOG BE PRIMARILY?		INDOORS	OUTDOORS: DESCRIBE OTHER
ARE YOU WILLING TO TAKE TRAINING/ OBEDIENCE OR CARE CLASSES		YES	NO
IF THE PET HAS BEHAVIOUR PROBLEMS, WHAT ACTIONS WILL YOU TAKE?			
DO YOU HAVE TIME TO TRAIN AND CARE FOR A DOG?		YES NO	IF YOU MOVE, DO YOU PLAN TO TAKE THIS PET WITH YOU? YES NO
ARE YOU WILLING TO ALLOW A NORTHERN LIGHTS REGIONAL HUMANE SOCIETY REPRESENTATIVE TO DO A SCHEDULED HOME VISIT?		YES	NO
<b>VETERINARY CLINIC OR VETERNARIAN NAME</b>			PHONE NUMBER
<b>PERSONAL REFERENCE 1</b>			
FULL NAME		PHONE NUMBER	RELATIONSHIP
<b>PERSONAL REFERENCE 2</b>			
FULL NAME		PHONE NUMBER	RELATIONSHIP
<b>I UNDERSTAND ALL INFORMATION PROVIDED IN THIS APPLICATION IS WILL BE USED FOR THE SOLE PURPOSE OF DECIDING IF THE PROPOSED ADOPTION IS IN THE BEST INTEREST OF BOTH THE INDIVIDUAL AND ANIMAL. ADDITIONALLY, I DO UNDERSTAND THAT ALL QUESTIONS MUST BE COMPLETED AND ANY FALISIFIED INFORMATION WILL RESULT IN A REJECTED APPLICATION.</b>			
APPLICANT 1 SIGNATURE			DATE
APPLICANT 2 SIGNATURE			DATE



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**REGIONAL HUMANE SOCIETY**



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Additional Notes