

**5028 Clarence Ave** Grasswood, SK S7T 1A7 Phone: (306) 385-7387

(306) 931-9792 Fax:

## **Dog Adoption Application Form**

Thank you for your interest in one of our adoptable dogs! Please complete the related form in full. If you have any questions or concerns, or if you need assistance, please call us during our business hours.

Please note: If you rent your home, please complete our application prior to attending our location and make your landlord aware of the forthcoming adoption.
Contact Information
Name:
Address: house number, street name, city, province, postal code Date of Birth:
Phone #:
Please provide any contacts numbers that would assist in returning the animal, should it be found, including, home, cell and work numbers.
Date of Birth: MM/DD/YYYY
e-mail:
Please note, you must be 18 years of age or older to adopt and must present an identification showing your address of residence.
Residence Information
Please select the applicable option:
I own my homeI live with family/friendsI rent
My home is a:
housetownhousecondo/apartmentacreage/farm
Do you have a fenced yard? Yes, No
If any Backle, also as a great de landland Safanna Care. Nove a planta a considera
If applicable, please provide landlord information: Name, phone number.
If you reside with family or friends and they rent, please provide their
landlords contact information.
1. How many people in total are in your household?
How many people in total are in your nouseholds:  How many children under 12 years?
3. Are there any allergies to pets? Yes, No
4. Does everyone in your house agree to adopt a dog? Yes, No

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	Do you have other pets? Dogs, cats, other? Yes, No List below i applicable.				
	Species	age	sex	fixed (if no why)	
Plan	ning for	your r	new p	et	
	•	reviou	•	before? Yes, No nquished or rehomed a pet? Yes, no. If	
3.	•		or this	pet, how would you rehome the animal?	
4.		-		ncially provide for your dog? Yes, no ed expenses:	
5.	How many basis?	hours	will the	animal be left home alone on a daily	
6.	Where will y	ou kee	ep you	r dog when you are at home?	
7.	Where will v	ou ke	ep the	dog when you are away? Indoors loose,	
	Indoors ke	nnelled pervisi	d, Outcon	loors, Other If other, please detail your confinement of your animal when you are	
8.	-			nodations for or considered where the ou are away for extended periods, such as	

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yes	
9.Have you trained a dog before? training? Please describe you	What do you plan to do for r training strategy.
	City of Saskatoon Animal Control
11. Do you know that a City of purchased annually for the anii	Saskatoon Dog License must be mal? Yes, No
I give the Saskatoon Animal Conti landlord with regards to my application	•
Is there a dog you are interested in?	Please list the animal ID A
Applicant signature	
Date	
in office use only:	
licant ID Type and number:	LL Consent Y / N / NA
fied field completion: Y/N ST #:	