



CITY OF PORT ISABEL  
ISABEL Y. GARCIA ANIMAL SHELTER  
262 WOODY'S LANE, PORT ISABEL, TX 78578  
956-943-3888

## ADOPTION APPLICATION

The purpose of this application is to:

- Learn about you, your family, and your home.
- To make the best possible match for you and your future pet

To be considered as an adopter you must:

- Be 18 years of age or older and have the consent of your household
- Have current identification showing your present address
- If a renter, have the consent of your landlord
- Be willing and able to spend the time and money necessary to provide training, medical treatment and proper care for your pet.

### **THINGS TO THINK ABOUT BEFORE YOU ADOPT:**

#### **PLEASE INITIAL ON EACH LINE INDICATING YOU HAVE READ & UNDERSTAND EACH STATEMENT.**

- \_\_\_\_\_ Filling in this application does not bind you to adopt an animal.
- \_\_\_\_\_ The Isabel Y. Garcia Animal Shelter representative might decide to not place an animal in your home at this time due to living arrangements, household dynamics, or the ability to pay for the expenses of keeping an animal.
- \_\_\_\_\_ You will be responsible to provide your pet with regular medications and vaccinations, veterinary cost to maintain a pet can be around \$30 a month or more.
- \_\_\_\_\_ We will verify your address.
- \_\_\_\_\_ If you are a renter, we will contact your landlord to verify approval.
- \_\_\_\_\_ Most of the animals are in the shelter because their former owners couldn't care for them, or they're from an unwanted litter, or they've been abused or neglected.
- \_\_\_\_\_ All adopted animals will need extra time and patience to adjust to their new home.
- \_\_\_\_\_ Not all animals will respond to their new surroundings in the same way.
- \_\_\_\_\_ Some animals will need housetraining, others will need obedience training, while still others will just need your love and attention.
- \_\_\_\_\_ The adjustment period could be as little as a few days, or as long as a few months.
- \_\_\_\_\_ You can always call the Isabel Y. Garcia Animal Shelter for advice or support. We can put you in touch with a volunteer who can help.
- \_\_\_\_\_ We will be conducting telephone and/or house visits to follow up on how well you and your pet are adapting to one another.
- \_\_\_\_\_ Adopting a pet is a COMMITMENT you make to care for that animal throughout its lifetime.

By initialing below you are agreeing that you have read and understand what is expected of you as an adopter of a pet from the Isabel Y. Garcia Animal Shelter, and that you will complete the application truthfully and completely.

If you do adopt, you will also be bound by the terms of the Adoption Contract.

Initials \_\_\_\_\_

ISABEL Y. GARCIA ANIMAL SHELTER  
**ADOPTION APPLICATION**

Fill in this form accurately, honestly, and completely. Please print.  
If you need more space for your responses, attach a separate sheet.

Date \_\_\_\_\_

**ADOPTER INFORMATION**

Your Name: \_\_\_\_\_ Shelter ID# \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip: \_\_\_\_\_  
Permanent or Mailing Address: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Occupation/Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
\_\_\_\_\_

**INTERVIEW QUESTIONS**

**Do you \_\_\_\_\_ OWN, or \_\_\_\_\_ RENT your home?**

**If rental,** Landlord's name: \_\_\_\_\_ Landlord's Phone: \_\_\_\_\_  
(We will verify landlord approval only when you adopt a pet from the Shelter.)

**Do you have a fenced yard?** \_\_\_\_\_ YES \_\_\_\_\_ NO If yes, describe your fence: \_\_\_\_\_

**Who else lives in your household?** List names, relationship, and ages: \_\_\_\_\_  
\_\_\_\_\_

**Does anyone in your household have allergies to pets?** \_\_\_\_\_ Describe: \_\_\_\_\_

**Is the whole household in agreement to adopting a Shelter pet?** \_\_\_\_\_

**If no, who isn't, and why?** \_\_\_\_\_

**What pets are currently in your household?**

Type/breed	Age	M/F	Spayed/Neutered	Kept inside or out
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**What other pets you have owned in the past 5 years?**

Type/breed	Age	M/F	Spayed/Neutered	Kept inside or out	What happened to it?
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Who is your veterinarian?** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Is there a dog/cat limit in your hometown?** \_\_\_\_\_ **What is the limit?** \_\_\_\_\_

**DOG ADOPTIONS:**

**Why do you want a dog?** \_\_\_\_\_

**How will the dog be confined on your property?** \_\_\_\_\_

**How will you provide exercise for your dog?** \_\_\_\_\_

**What training are you will to provide your dog?** \_\_\_\_\_

**How will you correct your dog if it misbehaves or is destructive?** \_\_\_\_\_

**How much money do you think it takes to support a dog?** \_\_\_\_\_

**CAT ADOPTIONS:**

Why do you want a cat? \_\_\_\_\_

Will this cat be allowed outdoors? If yes, how will you protect it from harm? \_\_\_\_\_

Will this cat be declawed? \_\_\_\_\_

What will you do if your cat shows destructive behavior? \_\_\_\_\_

How much money do you think it takes to support a cat? \_\_\_\_\_

**ALL ADOPTIONS:**

Have you decided on the animal that you want to adopt? If yes, name \_\_\_\_\_

Why this animal? \_\_\_\_\_

If no, what type of animal/breed are you seeking? \_\_\_\_\_

Where will you keep this animal during the daytime? \_\_\_\_\_

Where will you keep this animal at night? \_\_\_\_\_

How long will the animal be alone each day? \_\_\_\_\_

Will you be willing to work with the animal to adjust, or to provide basic training for the animal?

Explain: \_\_\_\_\_

What behaviors will be unacceptable to you? How would you correct these behaviors?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What will you do with your animal when you're on vacation or have to leave your home for extended periods? \_\_\_\_\_

What would cause you to give up an animal? \_\_\_\_\_

**COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Adopter's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Isabel Y. Garcia Animal Shelter Representative

\_\_\_\_\_  
Date

**Verified:**

\_\_\_\_ ID and Address    Date \_\_\_\_\_ IYG initials \_\_\_\_\_ ID Type/State/# \_\_\_\_\_

\_\_\_\_ Family approval    Date \_\_\_\_\_ IYG initials \_\_\_\_\_ Comments \_\_\_\_\_

\_\_\_\_ Landlord approval    Date \_\_\_\_\_ IYG initials \_\_\_\_\_ Comments \_\_\_\_\_