



# BRHA Matchmaking Application (must be 18 to apply)



I/We are interested in (name of animals) \_\_\_\_\_

**Completion and approval of a Matchmaking Application does not guarantee adoption of the animal you have selected. The staff will conduct a matchmaking interview to determine you and your family's needs and interests and make the best match to an available pet. Other applications may be also be pending as well as consideration of our waiting list.**

**The Bitter Root Humane Association reserves the right to refuse an adoption for any reason. The animals in this shelter have come from a variety of backgrounds; we want to ensure the animals in our care are placed into homes capable of being the best match to their needs.**

Names of all adults in home: \_\_\_\_\_

Street Address: \_\_\_\_\_ e-mail address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Name of employer: \_\_\_\_\_ Phone # \_\_\_\_\_

Have you adopted a pet from this shelter before? \_\_\_\_\_ If so, how long ago? \_\_\_\_\_

Do you still have the pet? \_\_\_\_\_

Where did you hear about the shelter or this particular animal? Newspaper \_\_\_ Internet \_\_\_ Friend \_\_\_

Photo Board in store \_\_\_ Other \_\_\_ Please specify \_\_\_\_\_

Do you own/rent? If renting, you must have landlord's express permission to adopt and keep this animal. Please furnish landlord's name: \_\_\_\_\_ Phone # \_\_\_\_\_

How many adults living in the home \_\_\_\_\_ children \_\_\_\_\_ ages \_\_\_\_\_

How many dogs \_\_\_\_\_ cats \_\_\_\_\_ Farm animals \_\_\_\_\_

Have they been spayed/neutered? YES/NO If not, please explain why? \_\_\_\_\_

Have you ever had a DOG before? \_\_\_\_\_ a CAT \_\_\_\_\_

What is your favorite or previously used training method? \_\_\_\_\_

Shelter pets may come with special needs, and sometimes difficult behaviors that may take time, consistency, training and patience. Can you make this commitment? \_\_\_\_\_

Will you take the dog/pup to obedience training if recommended? \_\_\_\_\_

Is your yard fenced? YES/NO Is the fence escape-proof? \_\_\_\_\_

If no, how will pet be confined to premises (county and MT state law)? \_\_\_\_\_

Are you willing to license your pet in your community? \_\_\_\_\_ City or County (circle one)

How will dog/pup be exercised? \_\_\_\_\_

Where at your residence will the pet spend most of its time? \_\_\_\_\_

When the pet is outside, what type of shelter will be provided? \_\_\_\_\_

Will anyone be home during the day? YES/NO/SOMETIMES \_\_\_\_\_

What will be the longest period of time the pet will be left alone. \_\_\_\_\_

What will you do with your dog/cat if you move or go on vacation? \_\_\_\_\_

What kind of qualities are you looking for in a dog or cat? \_\_\_\_\_

Do you have a size or breed in mind? \_\_\_\_\_

Why do you want to adopt this particular animal? \_\_\_\_\_

\_\_\_\_\_ Are all members of the family in agreement? \_\_\_\_\_

Who is this animal for? Self \_\_\_ Family \_\_\_ Spouse \_\_\_ Child \_\_\_ Parent \_\_\_ Other \_\_\_\_\_

Please check all that apply to your new dog/cat: Companion \_\_\_ Watchdog \_\_\_ Family Pet \_\_\_ Hunting Dog \_\_\_ Working Dog \_\_\_ Other \_\_\_ Please Specify: \_\_\_\_\_

How will you protect a dog if it rides in the back of an open pickup truck? \_\_\_\_\_

Who is your veterinarian? \_\_\_\_\_

Are your pets current on vaccinations? \_\_\_\_\_

By adopting this animal, you take on the responsibility of its care throughout its lifetime. Please explain your financial and moral commitment to this animal. \_\_\_\_\_

Have you ever had to give up a pet? YES/NO Under what circumstance & what arrangements were made for pet? \_\_\_\_\_

Tell us about other pets you have had \_\_\_\_\_

As part of the adoption contract, you must agree to a home visit of the pet and its surroundings by BRHA representative. Do you agree to this requirement if asked? \_\_\_\_\_

**I certify that the information provided on this form is true and correct. I am also financially able to care for this animal. I understand that proper food and veterinary care may be costly and I am able to meet these requirements. I understand that in some cases a home check may be mandatory prior to the dog's adoption. I understand that any false statements or improper care/treatment of the animal constitute grounds for confiscation and surrender of the animal to the Bitter Root Humane Association (BRHA). I understand and agree that BRHA may require return of the animal for any violation of the terms of the adoption contract and agreement. I further understand and agree that if at any time during the animal's life I am unable to keep the animal, I will contact the BRHA and make arrangements to return the animal who will arrange for re-adoption. Transfers of ownership even within the family is not allowed without contacting BRHA first.**

Signature: \_\_\_\_\_ Date \_\_\_\_\_

*The Bitter Root Humane Association is a private, non-profit organization and reserves the right to refuse any adoption.*

**Microchip Alternate Emergency Contact Info** (someone other than yourself):

Name \_\_\_\_\_ Phone: \_\_\_\_\_

Staff Use only:

Adoption Approved! By: \_\_\_\_\_ Date: \_\_\_\_\_

Denied: By: \_\_\_\_\_ Date: \_\_\_\_\_

Brief reason for denial: \_\_\_\_\_

Notes: