

Murray-Calloway County Animal Shelter



Application for Pet Adoption

81 SHELTER LN, MURRAY, KY. 42071

MCCASAPPLICATION@GMAIL.COM

270-759-4141

Which pet are you interested in? _____

YOUR NAME: _____ DOB: _____

DL #: _____

ADDRESS (street, city, zip): _____

PHONE NUMBER: _____

PLACE OF EMPLOYMENT: _____ POSITION: _____

EMAIL: _____

LIVING ENVIRONMENT: (please check one for each question)

DO YOU CURRENTLY: **OWN** ☐ **RENT** ☐ **LEASE** ☐ **OTHER** ☐ for how long? _____

DO YOU LIVE IN: **HOUSE** ☐ **APARTMENT** ☐ **TRAILER** ☐ **OTHER** ☐

NUMBER AND AGE OF PEOPLE IN THE HOME: _____

Landlord information:

NAME: _____ PHONE NUMBER: _____

I CONSIDER MY HOME TO BE:

☐ Calm & Quiet ☐ Active & Busy ☐ Both

HOW MANY HOURS PER DAY WILL YOUR ANIMAL BE UNSUPERVISED? _____

How will your animal be contained while unsupervised: _____

WHERE WILL YOUR NEW PET LIVE? (Select all that apply)

☐ Indoors Only ☐ Indoors and Outdoors w/Supervision ☐ Mostly Outdoors ☐ Only Outdoors

☐ Barn/Shed ☐ Tied Outside ☐ Kennel ☐ Running Free ☐ Fenced Yard

Current and Past Pets:

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If you've had a pet in the past, but have no pets currently, what happened to him/her?

Do you currently have ANY other animals at the residence? If so, how many? _____

Name	Type/Breed	Sex	Age	Spayed/Neutered? If no, why?
				[] Yes [] No
				[] Yes [] No
				[] Yes [] No

DO YOU HAVE A VET FOR YOUR PETS? [] Yes [] No

Vet Information:

Name of Clinic: _____

Address of Clinic: _____

Phone number of Clinic: _____

Account holders name: _____

I give my permission for MCCAS to contact my vet in order to verify that I have acted responsibly in the medical care for my pet(s) in consistency and am in good financial standing with the clinic [] yes [] no

Are you aware that all animals adopted from MCCAS must be spayed or neutered with **ABSOLUTELY NO EXCEPTIONS?** [] Yes

Have you adopted from us before? [] Yes [] No

Are you a first time pet owner? [] Yes [] No

What are you prepared to spend on your pet (food, unexpected and expected vet care, grooming, misc.) per year?

[] \$0-\$500 [] \$500-\$1000 [] \$1000+ [] Whatever it takes

****Have you ever been accused or convicted of animal abuse or neglect?** [] yes [] no

**** Have you, or any members of your household, engaged in any type of animal fighting?** [] yes [] no

**** I understand a dog/cat will act differently in different environments and will require a period of time to adjust to the living environment and other animals in the home.** [] YES [] NO

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I UNDERSTAND ANY ANIMAL ADOPTED FROM THE MURRAY-CALLOWAY ANIMAL SHELTER MUST BE BROUGHT BACK TO THE FACILITY IF IT DOES NOT WORK OUT, YOU CANNOT REHOME/GIVE AWAY THE ANIMAL. [☐] Yes [☐] No

DISCLAIMER

Per Kentucky State Law (KRS 258.015) Dogs, Cats and Ferrets must be vaccinated against rabies by the age of (4) months and revaccinated at the end of expiration of the immunization. (Typically once per year)

MCCAS employees have the right to deny any applicant. A vet reference check will be done on any applicant who currently has pets or has had pets within the last 3 years. We will try our best to process applications on Saturdays, but most vet clinics have unusual hours or are closed on weekends. Landlord permission is required on any rental properties.

I acknowledge that all of the information on the Entire Application is True and Correct. And, that I am applying to adopt this pet for myself and not for someone else. I will be the primary/responsible owner.

SIGNED:

DATE:

We Reserve The Right, In Our Sole Discretion, To Refuse Any Applicant. It Is For The Benefit Of Our Animals. The MCCAS Appreciates Your Consideration For Wanting To Provide A Loving Home For An Animal In Need. 2/2024