

CAMERON COUNTY PUBLIC HEALTH

Esmeralda Guajardo, MAHS
Health Administrator



James W. Castillo II, MD
Health Authority

Cameron County Animal Shelter

ID # _____

ADOPTION APPLICATION

Welcome to the Cameron County Animal Shelter! We are happy you have chosen to adopt from us. We sincerely hope we can be of service to you. This application is designed to help us determine if the adoption is in the best interest of the animal and to assist you as a potential adopter to find an animal most compatible with your lifestyle. Remember - we have the animal's welfare as our foremost consideration.

In order to be considered for adoption today, you must:

- be 18 years or older;
- have a picture ID with current address;
- have the knowledge and consent of all adults living in the household;
- be willing to spend the time and money necessary to provide the training, medical treatment, proper care, confinement and licensing of the pet;
- pay the adoption fee;
- understand that not all animals are available due to age, temperature, illness or other diseases; and
- Understand that the Cameron County Animal Shelter has the right to deny or approve your adoption application.

The animals available for adoption at the Shelter are what we call "random-source" animals, which means that we accept animals from anyone and anywhere. We want you to understand that when you adopt an animal from an animal shelter, you take a certain risk. We do our best to screen the health of each animal as it is admitted to the shelter and during the time it is here. However, there is always a chance that an animal has a disease that is incubating inside at the time of admission and doesn't show any symptoms of the disease. Therefore, Cameron County assumes no liability for this or any other disease.

Signature of Applicant _____ Date: _____

1. **Place of employment:** _____ **Phone:** _____

2. **Name of Spouse / Roommate:** _____

3. **Number of people in home: Adults** _____ **Children:** _____

4. **Type of dwelling: House Apartment Condominium Other:** _____

5. **Do you rent or own your home?** _____

6. **Landlord's name:** _____ **Phone:** _____

7. **Do you own a pet now? Yes** _____ **No** _____

If so, please list:

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Type of pet:

How/Why Obtained:

Is pet spayed/neutered?

8. Have you had pets in the past 3 years? Yes _____ No _____

If so, please list:

Type of pet:

How/Why Obtained:

Is pet spayed/neutered?

9. What is the name of your veterinarian? _____

10. Is anyone in the household allergic to animals? Yes _____ No _____

11. Primary reason for adopting a dog/cat: _____

12. What type of dog/cat are you looking for? _____

13. What attracted you to this pet? _____

14. Where would the dog/cat be during the day? _____

15. Where would the dog/cat be during the night? _____

16. What outside space is available to the dog/cat? _____

17. Animals are as individual as people, are you willing to spend the time and effort it will take to help this pet adjust to your home and lifestyle?

Yes _____ No _____

18. Dogs/cats often live 10 years or longer, are you willing to take the responsibility for that amount of time?

Yes _____ No _____

19. Under what circumstances would you not keep this dog/cat?

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20. If the dog/cat became destructive, what would you do?

21. Would you object to an inspection of your premises by our staff?

22. How did you learn about us?

I certify that the above is true and correct, any false information may result in the nullification of the adoption.

Print Name _____

Signature _____ **Date** _____

FOR OFFICE USE ONLY			
Animal Control Officer:		Date:	
Approved:		Disapproved:	
Reason for disapproval:			
Comments:			
Name:		Date:	
Address:			
Home Phone:		Other Phone:	
REGISTRATION AND RABIES VACCINATION DETAILS:	TAG #:	DATE OF VACCINATION:	PLACE OF VACCINATION:
Veterinarian/Clinic where animal spayed/neutered:		Date:	