



Thank you for choosing adoption! Please complete the following questions to help guide our conversation today.

Please send completed form to: Admin@panhandlehs.org or (308) 635-1317

Animal's Name: _____ Animal ID #: _____

Your Name(s): Mr./Ms. _____

Address: _____

Town, State: _____ ZIP: _____

Email: _____

Cell phone: _____ Home phone: _____ Work phone: _____

Best way to be reached by phone? cell home work

Best time of day to be reached? morning afternoon evening

I would like to sponsor an adoption for someone. I am answering the following questions from the perspective of the lucky recipient. Relationship to Person: _____

We welcome adopters who rent or live in an apartment or condo. We want to alert you that some landlords and management companies have size and breed restrictions, limits on number of pets, and/or require pet deposits or additional fees.

Are you aware of any restrictions or pet deposits for your rental? YES NO

Landlord Information- Name: _____ Phone #: _____

Tell us about members of the new pet's household (e.g., # of adults/seniors/young children):

Tell us about pets at home (e.g., # of Pets, Breed, Spayed/Neutered):

We'll explain this new pet's medical history and behavioral history. Check additional topics you'd like to discuss:

- | | | |
|---|---|---|
| <input type="checkbox"/> Feeding this pet | <input type="checkbox"/> Spaying/Neutering | <input type="checkbox"/> Crate-training |
| <input type="checkbox"/> House-training/litter box training | <input type="checkbox"/> Finding a trainer | <input type="checkbox"/> Moving with pets |
| <input type="checkbox"/> Grooming/nail trimming | <input type="checkbox"/> Introducing this pet to other pets | <input type="checkbox"/> Pulling on-leash |
| <input type="checkbox"/> Exercise, toys and fun activities | <input type="checkbox"/> Microchips and other ID options | <input type="checkbox"/> Flea/tick prevention |
| <input type="checkbox"/> Puppy/kitten-proofing your home | <input type="checkbox"/> Finding a veterinarian | <input type="checkbox"/> Heartworm prevention |
| | <input type="checkbox"/> Declawing | <input type="checkbox"/> Importance of Vaccinations |

Other questions: _____

[Shelters and Rescues: Use the following space for additional services your agency may be able to offer pets at home. Examples listed below.]

Extra services and opportunities; check any you are interested in:

- | | |
|--|--|
| <input type="checkbox"/> Need a cardboard crate with this adoption | <input type="checkbox"/> License current pets |
| <input type="checkbox"/> Information on our next low-cost vaccination day for any current pets | <input type="checkbox"/> Information about our training classes |
| <input type="checkbox"/> Information on microchipping service for any current pets | <input type="checkbox"/> Information about low-cost spay and neuter services and other veterinary services |
| <input type="checkbox"/> Information about supporting us with financial or in-kind donations | <input type="checkbox"/> Information about volunteering or fostering with us |
| <input type="checkbox"/> Make ID tags for current pets | <input type="checkbox"/> PHS Membership discount cards |
| | <input type="checkbox"/> Helping with PHS Events |

How did you hear about us? _____

How can PHS make your next experience at our shelter better?
