



Grand Strand Humane Society

3241 Mr. Joe White Avenue • Myrtle Beach, SC 29577
Phone (843) 918-4910 • Fax (843) 445-2821
www.grandstrandhumanesociety.com

Pet Adoption Application

We are glad you have come to adopt an animal from our facility. Please take a few minutes to carefully read and complete this application. The decision to adopt a pet is an important one. The adoption process is designed to help us meet the best interest of the animals, and assist you in finding the animal most compatible to your lifestyle. In order to insure that you and your pet will be happy for years to come, we ask that you tell us about any questions or concerns you may have. Before you begin your search for your new best friend, please note the following:

- **You must be 21 years of age or older to adopt.**
- **You must have a proper form of picture identification,**
- **You must be prepared to pay an adoption fee.**
- **If you rent, you must present us with a copy of your lease agreement.**

Please understand that we cannot guarantee the health of our animals. We cannot guarantee that an animal has had training or is housebroken. Our adoption fee includes spay/neuter, first set of vaccinations, heartworm testing and/or feline leukemia testing. GSHS reserves the right to deny any application. Thanks for your patience and cooperation.

Name: _____ Phone: (H) _____ (C) _____

Address: _____ City: _____ State: ____ Zip: _____

Email: _____

Number of household members: _____ Ages of Children: _____

Other pets in the home? ___ Yes ___ No

Veterinarian: _____

Will this be your first pet? ___ Yes ___ No

What type of pets did you previously own? ___ Dogs ___ Cats ___ Other: _____

What happened to them? _____

If you currently own an animal(s), is it spayed/neutered? ___ Yes ___ No

What pets do you currently own? _____

If you currently own a cat(s), is it an: ___ Indoor or an ___ indoor/outdoor cat?

Circle all that apply:

Own Rent If you rent, do you have permission from the landlord? ___ Yes ___ No

Type of Home: House Duplex/Townhome Apt/Condo Mobile Home Size? _____

Someone is home: All day Part of the day Evenings Nights

Amount of hours that the pet will be left alone? _____ Where will the pet stay? _____

Where will your pet sleep? _____

Yard is: Fenced Partly Fenced Not Fenced Dog Pen Size: _____

Type of pet wanted is: Adult Dog Puppy Adult Cat Kitten

Will be keeping my pet: Indoors Outdoors Both

Size preferred: Large (40 lbs.+) Medium(25-39 lbs.) Small(15-24 lbs) Under 15 lbs.

Pet is for: Companion Family Pet Watch Dog Gift for someone

Are you willing to use a crate to train your pet? Yes No

If your pet was to become destructive, what would you do? _____

Under what circumstances would you not keep your new pet? _____

If you become unable to care for the pet, do you agree to return it back to GSHS? Yes No

Would you agree to a home visit? Yes No

Are you willing to provide us with follow-up reports? Yes No

SIGNATURE: _____ DATE: _____

Pet Identified Name: _____ #: _____ Dog Cat

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FOR OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE

Employee: _____ Date: _____

Vet Check: _____ Outcome of Vet Check: _____

Approved: _____ Declined: _____

Reason: _____

