



# MiddleTennessee Treasures

all breed dog & cat rescue

## DOG ADOPTION APPLICATION

**Thank you for your interest in providing a forever home to an animal in need from Middle Tennessee Treasures, a non-profit organization (hereafter referred to as "MTT").**

The first step in the process of adopting a dog from MTT is to complete this application. The application provides us with important information and allows us to work with you to determine if the adoption is in the pet's best interest. The process also enables us to help you find a dog that will be well-suited to your lifestyle.

Our adoption fee includes the cost for vaccinations and other medical care; the spaying or neutering of the animal; training; and micro-chipping.

Name of Dog Desired: \_\_\_\_\_ Or Type Desired: \_\_\_\_\_

Potential Adopter Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

How many people live in your household? \_\_\_\_\_ List all ages for children under 18 \_\_\_\_\_

What type of household do you live in? (house, apartment, condo) \_\_\_\_\_

Do you Own or Rent? \_\_\_\_\_

If renting, please provide landlord information so we can confirm having a dog is acceptable in your household.

Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_

Is your yard fenced? Yes No If yes, type of fence? \_\_\_\_\_

If you don't have a fenced in yard, do you agree to keep dog on leash at all times when outside? Yes No

We recommend all other animals in your home be up to date on vaccinations.

Please list all of your current pets:

Dog or Cat	Breed	Age	M/F	Neutered/Spayed?	How long owned?



**P.O. Box 2460 Shelbyville, TN 37162-2460**  
**931-224-5010**  
**midntreasures@gmail.com**



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Have you had other dogs not listed above?  Yes  No

If yes, what happened to them? \_\_\_\_\_

\_\_\_\_\_

Shelter dogs have sometimes been in neglectful and/or abusive situations and, therefore, may experience difficulty making the transition to a new forever home. Are you willing to be patient while the animal adjusts?  Yes  No

How would you describe your level of experience with dogs? \_\_\_\_\_

\_\_\_\_\_

What energy level are you looking for your new pet?

High energy  Medium energy  Low Energy

Who will be the primary caretaker of your animal? \_\_\_\_\_

How many hours during the AVERAGE day will this animal spend WITHOUT a human? \_\_\_\_\_

Where will this animal be when someone is home? \_\_\_\_\_

Where will this animal be when alone? \_\_\_\_\_

Where will this animal sleep at night? \_\_\_\_\_

Would you be willing to have a MTT member do a home visit?  Yes  No

Please provide three personal references (non-family members) in which you give permission for an MTT representative to call:

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

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

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

Name & Address of your Veterinarian \_\_\_\_\_

Please tell us anything else you would like us to know to help match you up with the right forever animal:

\_\_\_\_\_

\_\_\_\_\_

I certify that all statements made by me on this adoption application are true and correct and understand that MTT reserves the right to refuse adoption to anyone. MTT will not adopt to persons who mislead or fail to provide accurate information on this application. By signing this application, I give MTT the permission to verify my information & contact the references I have given.

\_\_\_\_\_  
DATE: \_\_\_\_\_

POTENTIAL ADOPTER'S SIGNATURE



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