



Heart of Louisiana Humane Society (HLHS)

Pet Adoption Application

Pet ID No. _____
 Pet Rabies Tag No. _____ Pet Microchip No. _____
 Pet Name _____ Foster Family Name _____

Name _____ Driver's License Number _____
 Street Address _____ City, State _____ Zip Code _____
 Home Phone _____ (Work) _____ (Cell) _____
 Email _____
 Breed _____ Size _____
 Color _____ Sex: M F Age/DOB _____

Will pet be: _____ Inside only _____ Outside only _____ Both
 Reason for Adopting: _____ Play with children _____ Guard/Alert _____ Hunting
 _____ Companion for adults _____ Breeding _____ Gift

Applicant's Residence: (circle all that apply)
 House _____ Apartment _____ Other _____ Renting: Y / N Pets allowed: Y / N
 Name/Address/Phone # of Landlord _____

Front Yard Fenced: Y N Minimum Height _____ Secured: Y N
 Back Yard Fenced: Y N Minimum Height _____ Secured: Y N
 Number of adults in home: _____ Age and Sex of children in home: _____
 Pets currently in household (Age, Breed, S/N, Vaccinations, Problems) _____

Family Veterinarian _____ Last Visit _____
 Pets owned in the past five years? List name, breed, S/N, years owned and what happened to pet: _____

I certify that all information in this application is true and understand that giving false information may void the application and result in forfeiture of the adopted animal. I also understand that HLHS adoption policy requires that I be called and or visited for follow up at any time after the date of adoption.

Signature _____ Date _____
 HLHS Representative _____ Date _____
 Adoption Fee _____ Payment: PayPal _____ Cash _____

IF FOR ANY REASON YOU FIND YOU CAN NO LONGER CARE FOR YOUR ADOPTED PET, RETURN YOUR PET TO HLHS

PLEASE RETURN WITH THIS APPLICATION AND ALL OTHER PAPERWORK – (318)-413-9077