



ADOPTION INFORMATION SHEET

SPCA Tampa Bay does not discriminate in regards to sex, race or gender. SPCA reserves the right to deny any adoption that may not be appropriate for the animal or potential adopter. Picture identification is required to adopt an animal. Bring ID and completed Adoption Information Sheet to the Adoption Desk. Appropriate carriers or lead and collar required at the time of adoption. Please allow up to 40 minutes to be called to sign paperwork.

Date: _____

Driver's License #: _____ Date of Birth: _____

First Name: _____ MI: _____ Last Name: _____

Street Address: _____ Apt# _____ Lot# _____

City: _____ State: _____ Zip: _____

Home: (____) _____ - _____ Cell: (____) _____ - _____ Work: (____) _____ - _____

Email: _____

May we exchange this info with Hill's Science Diet for food to feed the animals in our shelter? YES NO

May we exchange this info with *Love My Dog* for continued support of our senior canines? YES NO

Are you aware of your current policies or contractual obligations in reference to bringing a new pet into your home? YES NO

Are there children in the house? YES NO if yes, please list ages: _____

Do you have other pets in the house? YES NO if yes, please list species: _____

Name of Veterinarian and/or Animal Hospital: _____

Emergency Contact Information: (other than yourself) this information is needed for your new pet's microchip.

First Name: _____ Last Name: _____

Primary #: (____) _____ - _____ Secondary #: (____) _____ - _____

The average cost to care for each animal helped by SPCA Tampa Bay is \$513.00. I would like to help with this by making a donation in addition to my adoption fee.

\$50 \$30 \$20 \$15 \$10 OTHER



OFFICE USE ONLY

Animal Name: _____ Animal Number: _____

SA Counselor/Introduction: _____ Comments: _____

Hold **YES** **NO** Exp. Date: _____ Time: _____ Approved by _____

Dog Intro required **YES** **NO** Diamond Dog Report: **YES** **NO** Joy Team: **YES** **NO**

PCAS License #: _____

Comments: _____

Adoption Counselor (Contract): _____ Adoption Counselor (PetPoint): _____

Date: _____ Donation Receipt Issued by: _____