



Saving Every Animal. Every Time.

5930 Highway 93 S, Missoula, MT 59804 • (406) 549-HSWM • adoptions@myhswm.org
myhswm.org • montanapets.org • petango.com • petfinder.com

First Name _____ Last Name _____ Date _____

Mailing Address _____ City _____ State _____ Zip _____

Physical Address (if different) _____ City _____ State _____ Zip _____

Home/Cell Phone _____ Work Phone _____ Email _____

HOUSING TYPE: house condo apartment mobile home other: _____

I CURRENTLY: own rent rent lot live w/ parents other: _____

LANDLORD'S NAME: _____ PHONE NUMBER: _____

LENGTH OF TIME AT CURRENT ADDRESS: _____

AGES OF CHILDREN IN MY HOME: _____

PETS I CURRENTLY HAVE OR HAVE OWNED IN THE PAST 5 YEARS?

Name of Pet	Type/Breed	Age	Gender	Spayed/Neutered?	Still Have?

MY CURRENT VETERINARIAN: _____

I HAVE OWNED A "POCKET PET" BEFORE: Yes No Currently

MY PET WILL PRIMARILY BE: Inside Inside & Outside Outside

IF OUTSIDE, MY PET WILL BE: Supervised Caged/Enclosed Loose

THE ACTIVITY LEVEL IN MY HOME IS: Low Moderate High

MY PET NEEDS TO ADJUST TO NEW SITUATIONS QUICKLY: Not important Somewhat Yes

MY PET NEEDS TO ENJOY BEING WITH CHILDREN IN MY HOME: Not important Sometimes Most of the time

I WANT MY PET TO ENJOY BEING HELD: Seldom Sometimes Most of the time

MY PET NEEDS TO GET ALONG WITH: (check all that apply) Dogs Cats Other

I WANT MY PET TO: (check all that apply) Be affectionate Be outgoing Not need grooming

I HAVE QUESTIONS ABOUT: _____

for staff use

ADOPTION COUNSELOR: _____ F: _____ LL: _____ APD: _____

PETS SUGGESTED/INTERESTED IN: _____

NOTES/TOPICS DISCUSSED: _____