



ADOPTION APPLICATION

ADOPTERS MUST BE AGE 21 OR OLDER

Personal Information

Name _____

Address _____ City _____ State _____ Zip _____

I understand as a Barren Co. resident, there will be a \$5 fee added to the total adoption fee for a **dog** license.

Home Phone _____ Cell Phone _____

Email (Print Clearly) _____

Household Information Circle all that apply

House Apartment Live with Parents Fenced Yard Rent Own

How many adults are in your home? _____ How many children? _____ Ages? _____

Animals that currently live with you (or visit regularly):

Name Dog/Cat Gender Age Spayed/Neutered

We require veterinarian clinic and phone number: _____

I would like to make a one-time donation of: \$ _____

I give permission for my adoption photo to be used as social media & marketing material for BRAWA

Signature _____ Date _____

Would you like additional training pamphlets? Y _____ N _____

Thank you for choosing adoption!