



Cleveland Animal Protective League
"Making Happily Ever Afters Since 1913"
Dog Adopter Survey



Today's Date: / / First Name: Last Name:
Address Apt. #
City State Zip Code
Primary Phone () Secondary Phone ()
Email Address

Do you rent or own your home? Rent Own
Are there any restrictions on animal ownership at your residence? _____

Have you had a dog before? Yes No This dog is for: Myself My family A gift

Please list the pets currently living in your home:

Name	Species/Breed	Age	Spayed/Neutered
			Y/N
			Y/N
			Y/N
			Y/N

Do you currently have a veterinarian for your animals? If so, who? _____

Please list the people currently living in your home:

Name	Relationship	Age

What qualities are you looking for in your new pet? Check all that apply

- Comfortable with children ages: _____
- Housebroken Good with cats Cuddly/Affectionate
- Protective/Guard Dog Quiet/doesn't bark No health issues
- Good with other dogs Mellow Playful/Energetic
- Trained Can be alone for _____ hours or more Other _____

This dog will be: Indoor Indoor/Outdoor Outdoor Only

Please check any topics you may have questions/concerns about that you would like to discuss with us:

- Jumping on people Dogs and children Exercise and playtime recommendations
- Introducing to other pets Allergies Veterinary care
- Housebreaking Training needs Microchipping Other _____

It's most important to me that my dog _____

How did you hear about the Cleveland APL? _____