



RUFF Pet Rescue
8501 SW Fox Brown Rd.
Indiantown, FL 34990
Phone 954-993-7860
ruffpetrescue@gmail.com
www.ruffpetrescueinc.org



Name of Pet(s) you are interested in _____

Date _____

Personal Information

Name _____ DOB _____

Physical Address _____

City _____ State _____ Zip _____

Spouse/Partner Name _____

Home Phone _____ Cell Phone _____

Email _____

Employment Information

Employer _____ Occupation _____

How long? _____ Retired? _____

Spouse/Partner Occupation _____

Spouse/Partner Employer _____ How Long? _____

Family Information

Number of Adults in Home other than Yourself _____

Children _____ Ages of Children under 18 _____

Home Information

Do you own? _____ Rent? _____

SF home _____ Condo _____ Mobile Home _____ Apartment _____

How long at current address? _____ If less than 2 yrs., previous address _____

If you rent, does your lease allow pets? _____ If yes, How many? _____

Name and Phone of landlord _____

Do you have a fenced yard? _____ If yes, what type of fence and how high? _____

Pets Information

Number of Pets _____

Names and Descriptions _____

Are your current pets spayed and neutered? _____ If no, why not? _____

Are your pet's vaccinations current? _____ If no, why not? _____

Are your pets on heartworm preventative? _____ If no, why not? _____

Where do you pets primarily reside? Outside _____ Inside _____ Both _____

Vet Care

Who is your current or past veterinarian? _____

Address _____ Phone _____

Would you allow us to speak to your vet to obtain information on the health care of your pets? _____

Please provide a description of what you consider to be routine vet care: _____

Have you ever turned an animal into a shelter? Yes _____ No _____

If yes, explain _____

References

1 _____ Cell # _____ Home# _____

2 _____ Cell # _____ Home# _____

3 _____ Cell # _____ Home# _____

The above statements are true to the best of my knowledge.

Sign _____ Date _____

Notes _____
