

ANIMAL BLOOD RESOURCES

Now You're Prepared PO Box 609 1009 S Clinton St Suite A Stockbridge, MI 49285 517-851-8244 (ph) 517-851-7762 (fax)

CANINE ADOPTION APPLICATION

Date:	
Name:	
Address:	
Phone Number:	
E-Mail Address	
I am interested in adopting:	(dog's name)
Do you have other pets? If so, please describe them.	
Are your pets current on vaccinations?	
Your veterinarian's name and telephone number:	
What is your housing situation (Renters please provide	copy of lease allowing pets)
Is your yard fenced?	
I understand veterinary care is my responsibility	-
	Signature

Shared Reception/Adoption/ABRI Canine Adoption Application