

**HUMANE SOCIETY OF HARRISBURG AREA, INC.
ANIMAL EXCHANGE PROGRAM APPLICATION**

PERSONAL INFORMATION:

1. Name: _____ Phone: _____
Grade: _____
2. School Name: _____ Phone: _____
School Address: _____
City: _____ State: _____ Zip: _____
3. Name of Supervisor/Principal: _____
Phone: _____
4. Does your School District allow classroom pets? _____
5. How many students on average will be in the classroom? _____
6. Ages of students? _____
7. Do any of your students have allergies to this animal? _____

PET INFORMATION:

1. Is this your first experience with a classroom pet? _____
2. Have you ever owned/cared for this particular type of pet before? _____
3. Do you currently have a classroom pet already? _____
If so, what type of animal? _____
4. Why do you want to adopt a classroom pet? _____
5. What type of caging/housing will this pet be kept in? _____
6. Who will be responsible for the care of this pet during the school year? _____
7. Who will be responsible for the care of this pet outside of the school year?
(Summer/Holidays) _____
8. If you could no longer keep this classroom pet, what would you do? _____
9. Are you familiar with the specific requirements that this classroom pet needs to live in a healthy, comfortable environment? _____
10. How will your school/classroom be able to financially provide proper care for this animal? _____
11. I understand that the Humane Society is not able to give any guarantees on the health, training, or temperament of this pet and any adoption fee is NOT refundable: _____yes _____no
12. I understand and accept that authorized Humane Society agents may do follow-up visits to check on the care this animal is receiving and can remove the animal if unsatisfied with the conditions: _____yes _____no
13. Which of the following classroom pets would you prefer (check all that apply):
Rabbit Guinea Pig Rat Ferret
Hamster Cat Gerbil Other

APPLICATION CONTINUED ON THE BACK

I certify the above information to be true and correct and authorize the Humane Society of Harrisburg Area, Inc. to verify the information provided through any available means:

Signature

Date

*If the animal being adopted can no longer be a classroom pet and is to be placed in a permanent home, the Humane Society requests that the adoptive family complete a separate adoption application before the transfer may occur. We want to make sure the best interests of the animal are being met and that our records are current. If a permanent home is not found outside of the classroom, the animal may be returned to the shelter.

THE HUMANE SOCIETY RESERVES THE RIGHT TO REFUSE ADOPTIONS!

Application approved/declined by: _____

Animal Intake #: _____