



Leavenworth County Humane Society, Inc.

100 W. Gilman Road, Lansing KS 66043

www.LCHSInc.org Email: LvnCoHS@live.com

www.facebook.com/LvnCoHumane

913-250-0506 KS License #CB001XWJ

ADOPTION APPLICATION

Leavenworth County Humane Society is a 501(c)(3) corporation. We operate from a small temporary shelter until we raise the funds to build and operate the community animal resource center that Leavenworth County residents need, want, and deserve. We also use volunteer foster homes. We are a licensed pet animal shelter under the Kansas Department of Agriculture, Kansas Pet Animal Act.

Our adoption fees cover only part of the routine cost of taking in and caring for the pets. Collecting an adoption fee allows us to continue our work. Adoption fees for dogs range from \$125 to \$250; adoption fees for cats range from \$90 to \$150. Fee is set based on size, age and breed.

All of the pets in LCHS, Inc. care see a veterinarian regularly. We provide core vaccinations. Pets are protected from parasites by preventatives. Cats are tested for FIV/FelV; dogs are tested for heartworm. Pet dogs and cats are microchipped.

The state requires that pet dogs and cats are spayed or neutered prior to adoption unless there is a documented reason to postpone that procedure. If that is the case, we are required to collect a spay/neuter bond (\$100 for dogs; \$50 for cats) in addition to the adoption fee. Once proof of sterilization is provided, the spay/neuter bond is refunded. **We normally spay/neuter and complete age-appropriate vaccinations prior to adoption.**

We prefer that animals in our care go to homes where they will be indoor family pets, and will be supervised and controlled when outdoors by fencing or a leash.

We consider applications in the order we receive them, but select the home that we feel is the best fit for that particular pet.

Please provide a brief answer to each question below. If you have any questions, contact us at LvnCoHS@live.com or 913-250-0506.

Name of Pet you are interested in: _____ Dog Cat

Or type of pet you would like to adopt: _____

Applicant Name: _____ DL #: _____

Address: _____ Primary Phone: _____

City, State, Zip: _____ Secondary Phone: _____

E-mail: _____ Date of Birth: _____

Veterinarian: _____

City, State, Zip: _____ Phone: _____

How did you learn about this pet / LCHS, Inc. ? _____

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Number of persons in your household: _____ Age of youngest person: _____

Resident companion animals:

Species	Breed	Name	Gender	Age	Years owned

Please describe your home (check all that apply): Years there? _____

- 1 story
 2 story
 3 story
 Mobile Home
 Townhome
 Condo
 Apartment
 Single Family
 Duplex
 Rural
 Suburban
 Urban

My pets are spayed/neutered: Yes No

My pets are current on standard vaccinations: Yes No

My pets are on heartworm preventative: Yes No

My pets are on flea preventative: Yes No

How many hours each day will the pet be home alone? _____

Please tell us anything else you think might help us understand the kind of home you would offer to a pet: _____

Did someone with LCHS, Inc. suggest you adopt from us? Please let us know so we can thank them! _____

Do you consent to receiving communications from LCHS, Inc. in the future via email, phone, text and/or postal mail? Yes No

I agree by submission of this form that LCHS, Inc. may verify the information I've provided. I also understand that LCHS, Inc. may conduct an internet background check and view my public presence on social media.

Printed Name: _____ Date: _____

Signature: _____