



PERSIAN DREAMS & CANINE THEMES
RESCUE SOCIETY



"Helping Every Tail Find A Happy Ending"

PO Box 23134 Medicine Hat, AB T1B 4C7 Phone: 403-529-2287 Fax: 403-528-4551
Email: persiandreams@hotmail.com Website: persiandreamsrescue.org

REPTILE ADOPTION

Name: _____

Address: _____

Mailing Address: _____

Telephone Number Home: _____ Cell: _____

E-mail address _____

Do you rent or own you home? _____ if you rent, name and contact information of landlord is: _____

Are you over 18 years of age? _____

Please provide 2 references with contact info:

Name _____ Phone Number _____

Name _____ Phone Number _____

I, _____ want to adopt the following reptile, _____

Species _____ Type _____ Sex M/F/U Age _____

I am aware that the life span of reptiles can range from 10-100 years, depending on the reptile.

_____ (Initial) the reptile I am adopting has an average life span of _____ years

I agree that I have the appropriate housing for this reptile and I am aware of and willing to provide the proper lighting, humidity, diet, supplements, and exercise required keeping this reptile in a healthy condition. _____ (Initial)

I have researched the requirements for this reptile thoroughly and am aware of metabolic bone disease. I am prepared to take all necessary steps to prevent and treat this condition if it applies to the reptile I am adopting. _____ (Initial)

I agree to meet any special needs this reptile might require. _____ (Initial)

I agree that this reptile is not to be used for breeding purposes, and agree to take all necessary precautions to prevent any accidental breeding. _____ (Initial)

I agree to contact Persian Dreams and Canine Themes Rescue Society in the event that I am unable to keep this reptile for any reason. _____ (Initial)

I am prepared to pay the adoption fee of \$ _____ to the Society.

Adopter Signature

Persian Dreams Representative Signature

Date Application Received

Date Application Approved