

Adoption Application (please print, fill out and email to: 4pawskiddoresque@gmail.com)

Today's Date:

You and Your Family

Your Name:

Your Occupation:

Spouse's Name:

Spouse's Occupation:

Home Street Address:

City, State & Zip Code:

E-Mail Address:

Work Phone:

Home Phone:

Cell Phone:

Do you have children living at home? Yes ___ No ___

If so, number and ages:

Please identify any other people living in the home and their relationship to you:

Pet(s) You Wish To Adopt

Name(s):

Put me on the waiting list for available rescue dogs: Yes ___ No ___

Preferences (sex, age, activity level):

Who is the pet for?

Are you looking for an inside pet or an outside pet?

Your Home

Do you live in a single family residence? ___ apartment? ___ town house? ___ mobile home? ___

Is your yard fenced? Yes ___ No ___

What type of fencing?

How high is the fencing?

Are the gates secure and locked? Yes ___ No ___

Do you have a pool? Yes ___ No ___

Is the pool securely fenced off from yard? Yes ___ No ___

Ownership of Home

Do you own the home in which you are living? Yes ___ No ___

If not, do you have the owner's permission to have a pet? Yes ___ No ___

May we contact owner to verify? Yes ___ No ___

Owner's name?

Owner's phone number?

Does the owner impose any weight restrictions on pets? Yes ___ No ___

What?

Living With a Pet

Where will the pet stay during the day?

Where will the pet stay at night?

How many hours and where will the pet be exercised?

How many hours and where will the pet be left at home alone?

Other Pets

Do you have other pets? Yes ___ No ___

Please describe your other pets.

Are your current pets neutered? Yes ___ No ___

Prior Pets

Have you ever surrendered a pet in the past? Yes ___ No ___

Why?

What happened to your prior pets?

Professional Help

Do you currently have a veterinarian? Yes ___ No ___

If so, please furnish name and phone number:

Are you willing to take the dog to training classes? Yes ___ No ___

Would you be willing to call in a trainer if a problem developed that you were unable to handle on your own? Yes ___ No ___

Who will take care of the dog when you travel?

Future Care

Dogs may live 15 years or more. What plans have you made for care of your pet if you become no longer able to care for the pet?

What would cause you to give up your pet and what would you then do with him/her?

Other information you deem pertinent to your application:

By submitting this application, I represent that the above information I have provided is accurate, and I agree to allow rescuers to verify this information.

I understand that you reserve the right to refuse adoption to any applicant.

This application will become part of the adoption contract.