

## Personal Information

Dog(s) Interested In

Select a date

Month

Day

Year

First Name

Last Name

Drivers License Number

Email Address

Home Phone Number

 - 

Area Code Phone Number

Cell Phone Number

 - 

Area Code Phone Number

Work Phone Number

 - 

Area Code Phone Number

Co-Applicant First Name

Co-Applicant last name

Co-Applicant Drivers License Number

Co-Applicant Email Address

Street Address where the dog will reside

City

State

Zip

Employer

Work Schedule

## Reason For Adoption

The adoption fee ranges from \$200 - \$300.

Is this Fee acceptable to you?

Yes

No

What do you consider a reasonable adoption fee?

Why have you chosen to adopt a rescue dog?

Why have you chosen this specific dog?

# Housing Information

Do you?

Own  Rent

**\*\* IF RENTING WE WILL ASK FOR A COPY OF YOUR LEASE**

Please enter pet deposit amount:

Please list any pet restrictions:

Landlord Name

Landlord Phone Number

Type of Dwelling

Single Family  Apartment/Condo  Townhouse

Name of apartment/condo complex:

Do you have?

Pool  Dog Door  Dog House

Tie Out  Outdoor Kennel

Do you have a fenced yard?

Yes  No

Fence Height

Please describe type of fence:

Number of Children at Home

Number of Adults at Home

Ages of Children



## Pet Ownership Information

Please list all the pets you have owned in the past 10 years. Are they still with you? If not, what happened to them?

Type	Breed	Spayed/Neutered	Still with you?	More Pets?
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

What happened?

Type	Breed	Spayed/Neutered	Still with you?	More Pets?
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

What happened?

Type	Breed	Spayed/Neutered	Still with you?	More Pets?
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

What happened?

Type	Breed	Spayed/Neutered	Still with you?	More Pets?
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

What happened?

## Pet Ownership Information

If there are additional pets please enter that information here

Have you ever given away, sold, or surrendered a pet?

Yes  No

Please explain?

Are your pets current on vaccinations?

Yes  No

Are your pets given monthly flea/tick preventatives?

Yes  No

Do your pets annually see a veterinarian?

Yes  No

Do you believe in declawing cats?

Yes  No

Are Dogs/Cats required to be vaccinated for rabies?

Yes  No

Are dogs required to be licensed with the county?

Yes  No

Have you seen a veterinarian for your pet in the last 12 months?

Yes  No

Veterinarian Name

Veterinarian Phone Number

What kind of heartworm and flea/tick preventative are your pets using?

What brand of food do you feed your pets?

What brand/type of treats do you feed your pets?

## Lifestyle Information

Daily number of hours away from home

Do you work from home?

Yes

No

If yes, how many days a week?

Click to edit this text...

Do you come home for lunch from work?

Yes

No

If yes, how many days a week?

Is it required that you travel for work?

Yes

No

If yes, how frequently?

Who will provide care for your pet while you are gone?

What will you do to exercise this dog?

Where will the dog be kept during the day?

Where will the dog be kept at night?



## Lifestyle Information

Where will the dog be kept when no one is home?

What happens to the dog if you move?

What do you see as normal pup/adult problems?

How would you encourage and reinforce appropriate behavior?

How would you discourage/prevent inappropriate behavior?

What would you do with your pet if you can no longer keep them?

Do you plan on doing obedience training? If yes, where?

Yes

No

If yes, where?

## Lifestyle Information

Do you plan on using any of the following?

- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Nylon/leather collar | <input type="checkbox"/> Head harness |
| <input type="checkbox"/> Prong collar         | <input type="checkbox"/> No collar    |
| <input type="checkbox"/> Harness              | <input type="checkbox"/> Choke chain  |
| <input type="checkbox"/> Shock collar         | <input type="checkbox"/> Other        |

If "Other" please explain

Check any of the following reasons why you might give up your pet?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Aggression                   | <input type="checkbox"/> New baby           | <input type="checkbox"/> Child loses interest |
| <input type="checkbox"/> Vet expenses                 | <input type="checkbox"/> Separation anxiety | <input type="checkbox"/> Moving               |
| <input type="checkbox"/> Too much noise               | <input type="checkbox"/> Runs away          | <input type="checkbox"/> Housebreaking issues |
| <input type="checkbox"/> Chewing/scratching furniture | <input type="checkbox"/> Marriage           | <input type="checkbox"/> Other                |

If "Other" please explain

Under what circumstances would you leave the dog outside without a leash?

Under what circumstances would you leave the dog unattended in the yard?



## Health Information / Issues

Does anyone in the home have allergies?

Yes

No

If yes, please explain

Has anyone in the home or who visits the home been convicted of animal abuse/neglect/abandonment or cruelty?

Yes

No

If yes, please explain

*The following questions are asked so that the prospective adopter fully realizes what the cost and maintenance would be to have a pet in their home. Many prospective adopters are surprised at the cost of food, medical expenses, and grooming that are necessary to keep a pet in good health. Please answer these questions to the best of your ability.*

Food

Your best guess

Grooming

Your best guess

Vet Care

Your best guess

### **IMPORTANT INFORMATION. PLEASE READ THE FOLLOWING.**

Adopting a dog is a very important decision and one that not only affects your family, but the dog you decide to adopt. Millions of dogs are euthanized each year because people do not seriously consider the care and maintenance of animals. Time and attention are major factors that need to be considered when taking a dog into your home. Medical expenses can be costly. All the dogs in Pet Rescue Alliance have been previously taken to a vet for an examination and spayed/neutered if necessary. If there are extenuating medical factors involved, all will be noted in the contract upon signing. It is the responsibility of the new owner to provide additional and maintenance vaccinations if/as necessary, and any preventative care required such as grooming, teeth cleaning, nail trimming, flea and heartworm preventative.

In addition it is the responsibility of the owner to provide the necessary training/ reinforcement to integrate their new dog into their home. If behavior problem arises, the owner agrees to contact Pet Rescue Alliance to discuss further training. The owner may also hire a trainer or enter the dog into a training program but must keep Pet Rescue Alliance apprised of the animals progress. Pet Rescue Alliance also Reserves the Rights to perform home inspections even after the dog is adopted.

By submitting this form, you agree to have read and understood the above information. You are certifying that the questions have been answered truthfully and in full. False information or misrepresentation will result in your disqualification to adopt from Pet Rescue Alliance, and / or the removal of your adopted pet.

If you have any questions please feel free to contact us. We will be more than happy to help you.