



**SOUTHERN ARIZONA GOLDEN RETRIEVER RESCUE
FOSTER/ADOPTION APPLICATION**

This is a combined foster and adoption application. Please fill out the form completely with all the pertinent information. It is a lengthy form, but will help us better match a dog to your particular needs and desires. The more information you can give us, the better match we can make for you and the golden. **Please print clearly and legibly.** A representative from SAGRR will be in contact with you.

We can receive your application in two ways. Send the completed application by email to adopt@sagrr.org or you can mail in your application to **SAGRR P.O. Box 70059 Oro Valley, AZ 85737.**

APPLICANT'S INFORMATION

DATE:

NAME:

ADDRESS:

CITY, STATE, ZIP CODE:

PRIMARY CONTACT NUMBER:

HOME PHONE:

CELL:

WORK:

EMAIL ADDRESS:

OCCUPATION/EMPLOYER:

HOUSEHOLD INFORMATION

LIST OTHER PEOPLE, INCLUDING CHILDREN, WHO WILL BE LIVING WITH THE DOG AND THEIR AGES:

NAME:	AGE:
NAME:	AGE:
NAME:	AGE:
NAME:	AGE:
NAME:	AGE:
NAME:	AGE:

LIST OTHER PETS YOU HAVE OR PREVIOUSLY HAD, AND THEIR GENDER, AGE

PET 1	GENDER:	AGE:
PET 2	GENDER:	AGE:
PET 3	GENDER:	AGE:
PET 4	GENDER:	AGE:
PET 5	GENDER:	AGE:
PET 6	GENDER:	AGE:

IF NOT SPAYED/NEUTERED, PLEASE EXPLAIN:

WHAT OTHER ANIMALS DO YOU HAVE?

IS ANYONE IN YOUR FAMILY ALLERGIC TO DOGS OR CATS? ☐ YES ☐ NO ☐ UNKNOWN

ARE YOU AWARE GOLDENS SHED? ☐ YES ☐ NO ☐ WASN'T AWARE

YOUR HOME ENVIRONMENT

WHAT TYPE OF HOME DO YOU LIVE IN? ☐ SINGLE FAMILY ☐ CONDO ☐ MOBILE HOME ☐ APARTMENT

DO YOU OWN YOUR HOME OR RENT ? ☐ OWN ☐ RENT

(If you rent, an approval letter from the landlord stating they will accept a dog over 25lbs will be needed in order for your application to be processed.)

IS THE HOME IN YOUR NAME? IF NOT, PLEASE PROVIDE NAME OF OWNER/LESSEE

DO YOU HAVE A DOGGIE DOOR? ☐ YES ☐ NO

IS YOUR YARD FENCED? ☐ YES ☐ NO

TYPE OF FENCE (block, iron, wood, chain link):

HEIGHT OF FENCE:

DESCRIBE YOUR BACK YARD (grassy, stone, flagstone, cement, irrigation system, trees, citrus, doggie door access)

SWIMMING POOL? ☐ YES ☐ NO

FENCED? ☐ YES ☐ NO

SPA? ☐ YES ☐ NO

FENCED/COVERED? ☐ YES ☐ NO

PET EXPERIENCE

HAVE YOU OWNED DOGS BEFORE? ☐ YES ☐ NO

HAVE YOU PREVIOUSLY OWNED A GOLDEN? ☐ YES ☐ NO

WHY DO YOU WANT TO ADOPT A GOLDEN? EXPLAIN WHY A GOLDEN RETRIEVER IS THE RIGHT DOG FOR YOU?

WHY DO YOU WANT TO ADOPT THROUGH A RESCUE ORGANIZATION?

HAVE YOU ADOPTED THROUGH A RESCUE ORGANIZATION BEFORE? IF YES, EXPLAIN:

IF YOU HAVE CURRENT PETS, OR HAVE OWNED A PET BEFORE, MAY WE CONTACT YOUR VETERINARIAN? ☐ YES ☐ NO

VETERINARIAN'S NAME:

VETERINARIAN'S PHONE NUMBER:

THE GOLDEN FOR YOU

GENDER ☐ MALE ☐ FEMALE ☐ NO PREFERENCE

AGE ☐ UNDER 1 YEAR ☐ 1 -3 YRS ☐ 4 -7 YRS ☐ SENIOR ☐ NO PREFERENCE

WHAT ARE YOUR EXPECTATIONS OF YOUR GOLDEN? ☐ COMPANION ☐ HUNTING ☐ OBEDIENCE ☐ AGILITY

☐ CHILD'S COMPANION ☐ THERAPY DOG ☐ SERVICE DOG

WHAT BEST DESCRIBES WHAT YOU ARE LOOKING FOR IN YOUR GOLDEN? ☐ QUIET ☐ GENTLE ☐ PLAYFUL ☐ ENERGETIC
☐ BALL PLAYING ☐ COMPANION ☐ DON'T KNOW

WOULD YOU BE WILLING TO ADOPT A GOLDEN WITH MINOR HEALTH PROBLEMS? (VALLEY FEVER, THYROID PROBLEMS, ALLERGIES, ARTHRITIS ETC) ☐ YES ☐ NO

WOULD YOU BE WILLING TO ADOPT A GOLDEN WITH MAJOR HEALTH ISSUES? ☐ YES ☐ NO

WOULD YOU BE WILLING TO ADOPT A GOLDEN WITH SPECIAL NEEDS THAT ARE TREATABLE? ☐ YES ☐ NO

WOULD YOU BE WILLING TO ADOPT A GOLDEN THAT HAS CANCER? ☐ YES ☐ NO

WOULD YOU BE WILLING TO ADOPT A GOLDEN THAT ISN'T HOUSE TRAINED? ☐ YES ☐ NO

CARING FOR YOUR GOLDEN

WHO WILL BE THE PRIMARY CARE GIVER FOR YOUR GOLDEN?

HOW LONG WILL THE GOLDEN BE LEFT ALONE ON A DAILY BASIS?

WHERE WILL THE GOLDEN STAY WHILE YOU ARE AWAY?

WILL THE GOLDEN BE LEFT OUTSIDE OR IN THE GARAGE WHILE YOU ARE AWAY? ☐ YES ☐ NO

WILL THE GOLDEN BE AN OUTSIDE DOG? ☐ YES ☐ NO

WILL THE GOLDEN BE CHAINED OUTSIDE? ☐ YES ☐ NO

WILL THE GOLDEN SLEEP INSIDE? ☐ YES ☐ NO OUTSIDE? ☐ YES ☐ NO

WHEN YOU TRAVEL, HOW WILL THE GOLDEN BE CARED FOR?

WILL YOU EXERCISE THE GOLDEN REGULARLY? ☐ YES ☐ NO HOW?

ARE YOU AWARE GOLDEN'S ARE CONSIDERED A LARGE BREED AND WILL REQUIRE HIGH MAINTENANCE COSTS, (FOOD, VET, GROOMING, ETC) ? ☐ YES ☐ NO ☐ WASN'T AWARE

TRAINING FOR YO-W GOLDEN

ARE YOU WILLING IF RECOMMENDED BY SAGRR TO USE A RECOMMENDED DOG TRAINER FOR YOUR GOLDEN? ☐ YES ☐ NO

ARE YOU WILLING TO CRATE TRAIN IF RECOMMENDED BY SAGRR? ☐ YES ☐ NO

FEE STRUCTURE FOR YOUR PERFECT GOLDEN

\$300 0-UP TO 3 YEARS OLD

\$250 3- UP TO 8 YEARS OLD

\$150 OVER 8 YEARS OLD

SPECIAL NEEDS WILL BE DONE ON AN INDIVIDUAL BASIS

MISCELLANEOUS

DO YOU UNDERSTAND THAT WE PLACE OUR RESCUES WITH THEIR BEST MATCH, NOT BY ORDER OF APPLICANTS?

☐ YES ☐ NO ☐ WASN'T AWARE

WOULD YOU LIKE TO BECOME INVOLVED WITH SAGRR? ☐ YES ☐ NO

WOULD YOU LIKE TO BE CONTACTED WITH VOLUNTEER OPPORTUNITIES? ☐ YES ☐ NO

WOULD YOU LIKE TO BECOME A FOSTER PARENT FOR SAGRR? ☐ YES ☐ NO

WERE YOU AWARE THAT FOSTER HOMES CAN ADOPT THEIR FOSTER GOLDEN? ☐ YES ☐ NO

HOW DID YOU LEARN ABOUT SAGRR?

AGREEMENT

I AM AT LEAST 21 YEARS OF AGE. ALL THE INFORMATION I HAVE GIVEN ABOVE IS TRUE AND COMPLETE. I ALSO CONSENT TO A HOME VISIT BY SOUTHERN ARIZONA GOLDEN RETRIEVER RESCUE HOME VISIT TEAM. I UNDERSTAND THAT SOUTHERN ARIZONA GOLDEN RETRIEVER RESCUE HAS THE RIGHT TO DENY MY APPLICATION.

APPLICANT'S NAME:

DATE:

APPLICANT'S NAME:

DATE:

THANK YOU FOR YOUR INTEREST IN SOUTHERN ARIZONA GOLDEN RETRIEVER RESCUE. WE APPRECIATE THE TIME YOU TOOK TO FILL OUT THIS APPLICATION.