



For GLCR Only: Date: _____

Reviewed By: _____

God's Little Creatures Rescue Prospective Owner Adoption Information Request

PLEASE PRINT

SECTION I: Personal Information

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Driver's License Number: _____ State: _____

Are you over the age of 18? ☐ YES ☐ NO

Do you live in a ☐ House ☐ Apartment ☐ Duplex ☐ Trailer ☐ Other: _____

Do you: ☐ Own ☐ Rent

If you rent, do you have permission from your landlord to have a dog at your residence? ☐ YES ☐ NO

Landlord's Name: _____ Phone Number: (____) _____

Do you live alone? ☐ YES ☐ NO Are you married? ☐ YES ☐ NO

How many people live in your household? Adults _____ Children _____

Please list their ages: _____

Is everyone in your household in favor of adopting a pet? ☐ YES ☐ NO

SECTION II: Employment Information

Do you work outside the home? ☐ YES ☐ NO

If yes, please list the name of your employer? _____

Occupation? _____ Work Schedule? _____

The cost of owning a pet can be expensive. If this pet becomes ill/injured, do you have the means to cover medical costs? ☐ YES ☐ NO

Revised: 3.3.2014

SECTION III: Previous Pet/Veterinarian Information

Please list the following information of all **DOGS** currently in your household:

Breed	Age	Sex	Spayed/Neutered (yes or no)	How long have you owned this dog?

If a dog has NOT been spayed or neutered, please explain why not? _____

Please list the following information of all **CATS** currently in your household:

Age	Sex	Spayed/Neutered (yes or no)	How long have you owned this cat?

If a cat has NOT been spayed or neutered, please explain why not? _____

Are all your pets on Heartworm preventative? ☐ YES ☐ NO

What type of Heartworm preventative? _____

Are all of your pets current on their vaccinations? ☐ YES ☐ NO

If you have had a pet(s) in the past but no longer have them, briefly share how long you had them and what happened to them:

Please provide at least one veterinarian reference that is handling your current pets' annual/maintenance medical care. **If you currently do not own any pets, please provide the veterinarian you would contact to handle this pets' medical care.**

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ This is my vet ☐ This is the vet I will use ☐

SECTION IV: Keeping Your Pet Safe

Where will the pet spend most of his/her time? ☐ Inside ☐ Outside

Do you have a fenced yard? ☐ YES ☐ NO

If you have a fenced yard, what TYPE of fence do you have? _____

What is the height of the fence (in feet)? _____

If outside, where will the pet reside? _____

If outside, what type of shelter will the pet have? _____

Where will the pet stay when you and/or your family are not at home? _____

God's Little Creatures Rescue reserves the right to conduct a home visit prior to and/or after adopting out one of our dogs to ensure we are matching the right dog to the right owner and that our dogs will be safe in their new home.

PRIOR to adoption, the best time for GLCR to conduct a home visit would be?

☐ Morning ☐ Afternoon ☐ Evening

AFTER the adoption, the best time for GLCR to conduct home visit would be?

☐ Morning ☐ Afternoon ☐ Evening

SECTION V: Miscellaneous

Briefly explain why you want to adopt this pet: _____

What would constitute a reason for giving up this pet? _____

SECTION VI: References

Please provide two (2) personal references whom we may contact about your adoption application. References should know you, your home, record of pet care, and preferably should be *UNRELATED* to you.

PERSONAL REFERENCE #1

First Name: _____ Last Name: _____

City: _____ State: _____

Home Phone: (____) _____ Cell Phone: (____) _____

How do you know this person? _____

PERSONAL REFERENCE #2

First Name: _____ Last Name: _____

City: _____ State: _____

Home Phone: (____) _____ Cell Phone: (____) _____

How do you know this person? _____

Thank you for taking the time to complete this request form. All information requested is helpful in matching prospective homes with the right pet. Upon receipt of this information we will get back to you as soon as possible.

For GLCR Notes Only:



God's Little Creatures Rescue Adoption Agreement

DISCLAIMER

There is NO guarantee made, expressed or implied, that any person requesting to adopt a dog through GOD'S LITTLE CREATURES RESCUE will automatically be approved. All adoptions are subject to acceptance based on a review process that requires collecting information from references and visiting the applicant's home. GOD'S LITTLE CREATURES RESCUE reserves the right to refuse to adopt a pet to anyone without disclosing any reasons.

The animals available for adoption come to GOD'S LITTLE CREATURES RESCUE (GLCR) in a variety of ways. All animals are examined and their health monitored while they are in GLCR care. However, due to stressful situations under which many of these animals come to GLCR, there is always the chance that an animal is incubating a disease without showing clinical signs. Therefore, we *strongly recommend* that you schedule a visit with your veterinarian within SEVEN DAYS of the adoption date. GOD'S LITTLE CREATURES RESCUE believes this animal to be in good health, but does NOT GUARANTEE the health of any animal or assume financial responsibility for future veterinary costs.

I understand and agree with the above statements: _____
Adopter's Signature

In order to adopt an animal from God's Little Creatures Rescue you must:

- Be at least 18 years of age or older.
- Have a valid driver's license.
- Provide an official form of identification showing your present address.
- Provide your veterinarian's name and phone number.
- Agree to provide daily care, training if necessary, Kind and humane treatment and vet care as needed, including ALL VACCINES AND HEARTWORM PREVENTATIVE.
- Provide your landlord's name, phone number and lease expiration date if you are renting. We WILL CALL to verify all information and that pets are allowed in your residence.
- Be able to meet all necessary requirements so that the adopted pet can live a happy, healthy and safe life for the rest of his/her life with you.
- Agree to a home visit PRIOR to adoption as well as a FOLLOW-UP visit in the future.

PLEASE NOTE: By completing the Adoption Application & Agreement, and providing a vet reference, you are giving God's Little Creatures Rescue expressed authorization to contact said vet and confirm care of your current animals. *Anyone who intentionally misleads or fails to provide accurate information on the adoption application will be denied all adoption rights.*

Thank you for your compassion and for understanding the importance of our adoption process.

Adopter's Signature: _____

Printed Name: _____

GLCR Representative: _____

Date: _____



God's Little Creatures Rescue Adoption Contract

I understand that IF this pet is not already spayed or neutered, that I MUST make arrangements to have this pet spayed or neutered WITHIN 10 DAYS OF THE DATE OF ADOPTION.

I understand that due to the cost involved in the veterinary care, feeding, fostering and training of this pet, that there will be NO REFUND for pets that are returned. *(PLEASE, if you think, for ANY reason, that you cannot commit unconditionally to this pet for the rest of his/her life, do NOT proceed with the adoption process.)*

If for any reason I cannot keep the pet I adopt, I agree and promise to return him/her to God's Little Creatures Rescue (GLCR). I understand that I must arrange a date and time with the adoption coordinator for the return of the pet and that it may take 1-5 days to get the adopted pet back into GLCR program. I further understand that it is MANDATORY for the adopted pet to be returned if I cannot keep him/her.

I further agree to take my newly adopted pet to a veterinarian WITHIN 3 DAYS of adoption for a health check and fecal (stool) exam. I promise to take my pet to a veterinarian for the required and recommended annual vaccinations, including boosters for puppies. I promise to keep my adopted pet on heartworm preventative and flea control for the remainder of his/her life as recommended by my veterinarian. If my pet becomes ill or injured, I promise to obtain immediate veterinary care and I am prepared financially to take on this responsibility.

I promise to provide my pet with proper, nutritious food, fresh, clean water, adequate shelter and kind, humane treatment at all times.

I promise NOT to sell, trade, loan, or give away this adopted pet and will NEVER allow him/her to be used for ANY purpose that could cause harm or injury to him/her.

I agree that this pet's welfare is the MOST important factor and if any representative of God's Little Creatures Rescue finds this adopted pet in unsuitable living conditions or finds me in violation of any terms of this agreement or contract, God's Little Creatures Rescue reserves the right to TERMINATE THE CONTRACT WITHOUT NOTICE and take immediate possession of the adopted pet. I understand and will pay any and all reasonable attorney's fees incurred by God's Little Creatures Rescue in association with any violations in the event that an attorney is consulted or suit is brought for the return of this adopted pet.

I agree to a home visit PRIOR to the adoption and a FOLLOW-UP visit AFTER the adoption. I am at least 18 years of age.

I understand that God's Little Creatures Rescue is supported mainly by volunteer efforts and therefore, the adoption procedure may take time.

Signature of Adopting Person: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

For GLGR Only:

Name: _____ ☐ Male ☐ Female

Payment Type:

☐ Cash ☐ Check

Age: _____ Breed: _____ Spayed/Neutered: ☐ YES ☐ NO

Amt. \$ _____

Microchipped: ☐ YES ☐ NO Microchip #: _____