

## Name of dog you are interested in adopting:

Date:
Drivers license number:
Name:
Spouses Name:
Address:
City:
State:
Zip Code:
Home Phone:
Work #
Cell #:
Email Address (valid email is required):
Are you over 18 years old? :
Are you a student? :
Occupation:
Employer:
Employer's street :
City:
State:
Zip:

How long have you lived at this address?:

Type of current home:

Type of street:

Have you checked with your landlord or homeowners' association regarding permission to have a dog?

Does the city you live in have any breed restrictions?:

Do we have your permission to contact your landlord?

Landlord's Name: Landlord's Phone #:

How many adults in the household? :

How many children?: Child: Ages: Why do you want to adopt the dog:

Do the other members of your household understand the time and possible financial goes into caring for adopted animals and are they in agreement with you regarding the care of animals you are adopting? :

Have you adopted a dog before?: Have you ever surrendered a dog to a shelter or rescue group?: Have you ever adopted a dog from a shelter or rescue group?: If "Yes", what rescue group or shelter did you adopt from?

Will this dog be enrolled in obedience classes? Other training?: Will this dog be chained or tied outside? : Where will the dog be kept most of the time?

What type of outdoor shelter will you have for the dog?
Will the dog be crated?: How many hours a day?
Do you have a fenced yard?:
Is there any type of lock on the gate(s)?
What type?

Who has access to your yard?:
If "Yes", please describe the type and height of fence:
Do you have a pool or deep pond?:

If "Yes", is there a fence around it? Yes No Where will the dog sleep (please be specific);

How many hours will the dog be alone each day?: Where will the dog be kept when alone?: How soon after the dog arrives home will it be left alone? How often do you travel? :

How do you plan to provide for the dog when you are out of town?;

Is anyone in your household allergic to dogs:

If "Yes", are they on medication that can control their allergies?

Yes

No

How would you rate your level of dog owning experience?;

How do you normally walk your dog?:

How often do you walk your dogs?:

What animals do you currently own?

# of Dogs: # of Cats

Breed/s:

Have they all been spayed and/or neutered? : Are they all current on their vaccinations? :

Other animals?:

Do you object to an inspection of your premises by a rescue representative?;

Veterinarian:

Name and Address:

Phone #:

How did you hear about us?:

Word of Mouth

Friend/Family

TV

Radio

Magazine

PetFinder

Craig's List

Adoption Event

1-800-Save-A-Pet

Pets911

Other: Please specify:

Will you be willing to sign your new dog up for Obedience classes at your own expense?

Pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, shelter and exercise for your new pet?

Are you able and willing to make a long-term commitment to care for your pet for its entire life span, which could be 15 to 20 years?

What reason would prompt you to give your dog up?

If your present relationship was to change or there was a death in your family, with whom will the dog go?:

I understand that a home visit is required prior to final placement. I understand that a home visit does not guarantee placement. I understand that the donation or contribution is a gift given freely and not a purchase price for a dog and is not refundable.

PERSONAL REFERENCES (PI	LEASE DO NOT INC	LUDE FAMILY):	
Name: Phor	-	Relationship:	
Name: Phor	=	Relationship:	
Which of the following reasons might prompt you to give up your dog?			
If a problem with the dog's behavior arises would you be willing to seek help immediately from the rescue group and/or trainer we refer?			
If you work with one trainer and willing to get a second opinion?	their training techniqu	ues are not effective, would you be	
Would you agree to consult and pay for a trainer or behaviorist if any problem develops?			
\$ is required to help offset co	ests incurred to resc more than the minima	I donation to care for, we welcome	
Print name/s:			
Signature/s:			
_			
Date:			
Norma Valencia (323)926-6673(only text)			
Xochilt Delgado (Adoption Coordinator) Puppyandpalsrescue@gmail.com			