



Canine Adoption Application

Name: _____

Occupation: _____

Address: _____

City: _____

State: _____

Zip: _____

Day Phone: _____

Evening Phone: _____

Email: _____

Best way to contact you: _____

How did you hear about us? _____

Which dog are you interested in? _____

Why do you want a dog?

Do you live in a:

Apartment _____ House _____ Townhouse/Duplex _____

Mobile Home _____ Other: _____

Do you own or rent your home? own

If you rent, does your lease/landlord allow you to have a dog? Y / N

Are there any restrictions on what type of dog you can have (max. weight, breed, etc.)? Y / N

If so, what are they? _____

Please list people, including yourself, who live in your home (use back of page if you need more space):

Name	Age:	Sex:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Who will be responsible for the primary care of the pet? _____

Are there any children that visit regularly?

Do you have a fenced yard?

If yes, what height? _____

What material? _____ Other: _____

If not, are you willing to walk your dog several times a day? Y / N

Will this be an indoor dog? Y / N

If no, where will the dog be kept?

How long will the dog be alone each day? _____

Where will s/he stay when you are away from home?

At work/school? _____

On vacation? _____

In emergency situations? _____

Where will s/he sleep at night? _____

Please list current pets: none

Name:	Type:	Age:	Sex:	Spayed/Neutered?
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N

Are these pets indoor or outdoor? _____

Please list previous pets (use the back of the page if you need more space):

Name:	Type:	What happened to him/her?
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you've had a dog before, what did you like most about it? _____
