

ADOPTION APPLICATION

PERSONAL INFORMATION

Name: _____

Address: _____ City _____ State _____ Zip _____

e-mail: _____ Home Phone # _____

Work Phone # _____ Cell Phone # _____ Best time to call: _____

Occupation: _____ Spouse Occupation _____

PERSONAL REFERENCES

Name: _____ Phone # _____

Relationship: _____

Name: _____ Phone # _____

Relationship: _____

Name: _____ Phone # _____

Relationship: _____

LIVING SITUATION

Do you own or rent your home? _____

If renting, do you have your landlord's permission to keep a dog? YES/NO

Landlord Name: _____ Phone # _____

How long have you lived at this address? _____

Do you have a fenced yard? YES/NO if so, fence height _____ Fence type _____

Does fencing completely enclose a yard for the dog? YES/NO

If no fence, how will you handle the dog/s exercise and potty duties?

Do you have a separate fenced kennel run? YES/NO List height & size _____ Type _____

How many adults in household? ____ How many children ____ Age and sex of children _____

PET INFORMATION/HISTORY

Do you own dogs? YES/NO If so, what kind? _____ How Many? _____

Are they spayed/neutered? YES/NO If not, why? _____

Do you own cats? YES/NO If so, how many? _____ Declawed? YES/NO

Other pets? _____ Do you have a regular veterinarian? YES/NO

Name _____ Phone # _____ Address _____
_____ City _____ State _____ Zip _____

How many dogs/animals have you owned in the last five years? _____

Give names, age, sex, breed of each: _____

What happened to them? _____

REGARDING THIS PET

List all plans for this dog: (circle/underline/highlight all that apply)

Pet Guard Hunting Other: _____

Where will dog spend the day?

Loose in house ___ Crate ___ Basement ___ Garage ___ Fenced yard ___ Fenced Kennel run ___
with shelter ___ without shelter ___ Doggie Day Care ___

How many hours on the average will the dog spend alone? _____

Where will dog spend the night?

Loose in the house ___ Crate ___ Basement ___ Garage ___ Fenced yard ___ Fenced Kennel run ___
with shelter ___ without shelter ___ Other describe _____

Who are you interested in? _____

Do you agree to license this dog and give regular health care? YES/NO

Are you willing/able to pay for annual vet care for vaccinations, heartworm testing, teeth cleaning,
check-ups,? YES/NO For emergency expenses? YES/NO

Do you agree to contact Kirby's Friends Animal Rescue if you can no longer keep this dog? YES/NO

Would you be willing to let one of our representatives visit your home by appointment? YES/NO

If not, why? _____

I understand that this is an adoption application and NOT A CONTRACT. All of the above information I have given is true and complete. This dog will reside in my home as a pet. I will provide it with adequate food, water, in home shelter, training, affection, and medical care. I am in full agreement with these terms of adoption. German Kirby's Friends Animal Rescue is in no way liable or responsible for any damage, accident or injury resulting from the placement of a dog into my household.

Applicant Signature: _____ Date: _____

Parent Signature if Applicant is Under 18 Years old: _____