

## Adoption Application

By submitting this application I certify that the information I have provided is complete, true and accurate and that I give my permission to Pound Dog Rescue to contact my landlord (if applicable) and my current and/or previous veterinarians. Submission of an application does not guarantee an adoption of a dog and Pound Dog Rescue reserves the right to refuse any application. Please understand that this form is done to try to match a dog to your home in a way that will ensure another rescued dog will find its forever home and you will have a companion dog for the rest of its life span. A home visit with the dog you are interested in adopting is mandatory and part of the adoption process.

NOTE: All information provided to Pound Dog Rescue will be kept strictly confidential and will only apply to your adoption application.

Adoption Informati	ion							
Name(s)		Address						
Home Phone	Cell Phone		Prefe	rred Number _				
Best Time To Call	Email Addr	Email Address						
Occupation		Occupation	ı					
Employer		Employer						
How long have you	nt 1)	_ If less tha	n 1 yr, how lon	g were you at yo	our pervious	job		
How long have you	been at your present job (Applica	nt 2)	_ If less tha	n 1 yr, how lon	g were you at yo	our pervious	job	
Household Informa	ation							
Number of persons i	in the home Relation	onship(s) to App	licant					
Who will be the prim	nary caretaker of the dog		Do	all members in	n the home want	t to adopt a d	log	
f not, please be spe	ecific about who disagrees and	why						
ls anyone in the hou	sehold allergic to dogs? If so, h	now do you plan	to manage	the allergy				
Do you have any ch	ildren Yes No	If yes ple	ase provide	the following in	nformation for ea	ach child		
Name	Se	ex Age _	Na	me		Sex	Age	
Name	Se	ex Age _	Na	me		Sex	Age	
Name	Se	ex Age _	Na	me		Sex	Age	
lf you have children,	what type of exposure or expe	erience have the	y had with p	ets? (Please provi	de response below)			
Do you have regular	visitors with whom the dog wil	I need to interac	t with (For ins	ance, grandchildren	or elderly relatives)			
Are there currently o	other pets in the home? Yes	No _	If yes	s please provid	e the following ir	nformation fo	r each pet	
Species	Breed		Age	Size	Sex	Spay/N	eutered	
Species	Breed		Age	Size	Sex	Spay/N	eutered	
Species	Breed		Age	Size	Sex	Spay/N	eutered	
Species	Breed		Age	Size	Sex	Spay/N	eutered	



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How many	pets have you	owned in the last 1	0 years (Please	use the tables	below for each pet)		
Species Breed		Name		Yrs Owned	Sex	Spay/Neutered	
What happe	ened to the pet						
Species _	Bre	eed	Name	, 	Yrs Owned	Sex	Spay/Neutered
What happe	ened to the pet						
Species _	Bre	eed	Name		Yrs Owned	Sex	Spay/Neutered
What happe	ened to the pet						
Species _	Bre	eed	Name		Yrs Owned	Sex	Spay/Neutered
What happe	ened to the pet						
Species _	Bre	ed	Name		Yrs Owned	Sex	Spay/Neutered
What happe	ened to the pet						
Have you e	ver surrendere	d/given away a pet	Yes	No			
If yes why,	and what did y	ou do with the pet					
How many	hours a day wil	ll your dog spend a	lone	Ar	e you willing to cra	te train your dog	Yes No
Who will ca	re for your dog	en no one is home when you are t or on vacation					
Does anyor	ne other than fa	amily/household res	sidents come i	into your h	ome on a regular b	asis (For instance, clean	ers) Yes/No
If yes how v	will you ensure	your dog's safety v	vhen outsiders	s come and	l go		
Is your home a House Co		ondo Apartr		ent I	Mobile Home	Other	
Do you C	Own	Rent Otl	ner l	f you rent o	lo you have your la	andlords permission	Yes No
Please prov	vide your landlo	ords name and pho	ne number				
If less than did you live If your yard the fence If your yard	2 years, what we there is completely for is not complete.	It your current addrives your pervious fenced, what is the ely fenced, how do bliance with confine	address and h type and heig you plan to ke	ht of			
Do you hav	e a swimming	pool or hot tub `	Yes N	No	_		
Is it fenced	separately fron	n the rest of the ya	rd Yes _	No			
Does it have	e a secure cov	er that a dog canno	ot get under	Yes	No		



Applicant's Signature

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Dog Preference	Information									
Describe the dog	you want to	adopt	Male		Female	No	Preference _			
Size Preference	Small	Mediu	ım	Large	Giant		Activity level	Low	Medium	High
If a dog seems suitable in all other ways, I would be willing to consider the specific dog you are interested in adopting and have you rethis breed of dog								Colour Name		Age
What is it about th	nis dog vou f	ind appe	als to voi	J					<u> </u>	
Are you aware of	•		·	-	estyle Yes/	No				
Are you aware of	the training	requirem	ents and	potential	challenges of t	his particu	lar breed of do	g Yes/No	)	
Are you willing to If approved, but for your application of How did you learn	or some reas n file for dog	son the a	doption for a come	•	•		•	u like us to	keep Yes/N	lo
Is there any informabout you, your fa	•									
Veterinary Inform	nation									
Your veterinarian'	s name				Ho	w long ha	ve you been a	client with	this veterinaria	n
Name of Vet Clini	c and phone	number								
If you own a pet n	low, or have	within th	e past 5	years, ple	ase provide at	least one	veterinary refer	ence. (If you	cannot, please tell	us why)
Personal Reference Please provide two Name		ho are far	niliar with	your expe	•	pet owner a		members of	your family or h	ousehold
Home Phone		Cell F	)hono			erred Num	• -		est time to call	
Name		0611 F	HOHE			elationship			COL HITIG TO CAII	
Home Phone		Cell F	hone			erred Num	-	Ве	est time to call	
_	icants mus			to sign a			legally of age			nt
I hereby authorize		•	-	•	. •		• • •		<i>.</i>	

pounddog.ca@gmail.com

Date