

Application to Foster/Adopt

Contact Information		
Full Name:		
Address:		
How many years at this address:	Daytime phone:	Evening phone:
Occupation:	Best time to call:	
Email address:		

Family & Housing
List all members in the household (please include age and relationship to you):
What type of home do you live in? (Single family, town home, apartment, farm, etc?)
Please describe your household: ___ Active ___ Noisy ___ Quiet ___ Average
If you rent, please give the rules governing pets and the landlords name and number:
(By providing this information you are allowing Pawz Patrol Rescue to contact your landlord, please inform your landlord so they are aware when we contact them)
Does anyone in the family have a known allergy to dogs:
Is everyone in agreement with the decision to foster/adopt a dog:
Do you have time to provide adequate love and attention?

Other Pets

List all pets in the household (please specify breed and age):

Are these pets up to date on vaccines?

Are these pets spayed/neutered? If not, why?

Have you ever surrendered a pet? If so, why?

Have you ever euthanized a pet? If so, why?

Have you ever lost a pet to an accident?

How do you discipline your pets and why?

Veterinarian Information

Do you have a regular veterinarian?

Veterinarian's Name:

Clinic Name:

Clinic Address:

Clinic phone number:

(By providing this information you are allowing Pawz Patrol Rescue to contact your Veterinarian. Please inform your veterinarian and authorize the release of information to Pawz Patrol).

About the Dog You Wish to Adopt

What is your idea of an ideal dog and why?

Desired age:

Desired size:

Desired breed:

Breed you would not adopt:

Desired sex: ____ Spayed Female ____ Neutered Male ____ No preference

Willing to adopt: outgoing/hyper dog shy dog
 dog that needs regular medication dog that needs training
 dog that needs grooming none of the above listed

Where will the dog spend the day? (*describe*)

Where will the dog spend the night? (*describe*)

Number of hours on average dog will spend alone?

Who will have primary responsibility for this dog's daily care?

Who will have financial responsibility for this dog?

Do you agree to provide regular health care by a Licensed Veterinarian? Yes No

When the dog goes out, how do you plan to supervise him/her? Fenced yard?

Do you agree to contact Pawz Patrol if you can no longer keep this dog? Yes No

Are you willing to let a representative of Pawz Patrol visit your home by appointment? Yes No

Would you be interested in fostering? Yes No Would like to know more

Personal Reference #1

Full Name:

Address:

Phone:

Relationship to you (relative, neighbor, friend etc.):

Personal Reference #2

Full Name:

Address:

Phone:

Relationship to you (relative, neighbor, friend etc.):

IN ADOPTING THIS DOG YOU AGREE TO:

- * Permit the rescue to conduct a home visit upon placing the dog and follow up calls for the purpose of assuring the proper care and adjustment of the dog.
- * If you can no longer care for the dog, NEVER put the dog in a shelter, give to another person (even a relative) or sell or give away the dog on Craigslist or such. In the event you cannot keep the animal, you MUST IMMEDIATELY contact the rescue.
- * Adopters are required to purchase an identification tag for your new dog within the first 24 hours of possession. Adopters MUST notify us IMMEDIATELY if the animal becomes missing or lost so we may assist in finding it.
- * Adopters: Accept possession, title and responsibility of the animal described above at your own risk, and hereby release and waive any right against the rescue which you may have now, or in the future, for any damages to person or property caused by said animal. Recognize that animals, like humans, differ in their responses to different situations and that we cannot make any claims or representations as to previous or future behavior and actions of the animal.
- * Adopters: Have the animal checked by your veterinarian within 7 days. Provide medical care at your own expense of any conditions previously unknown to the rescue, as well as routine yearly exams for as long as you own the dog. Your pet has been vetted upon finding it and medical records will be provided as proof of current state of health.
- * Adopters: The adoption donation helps rescue, feed, provide medical care, spay/neuter, and place abandoned dogs. I understand that this adoption fee is not a purchase price for a dog. ____ (Initials)

IN SIGNING BELOW YOU AGREE TO ALL OF THE TERMS ABOVE AND UNDERSTAND THAT IF YOU HAVE GIVEN FALSE OR MISLEADING INFORMATION OR DO NOT FOLLOW THE TERMS OF THIS CONTRACT, ANY OF THE ABOVE AS INDIVIDUALS OR AS AN ORGANIZATION MAY RECLAIM THIS ANIMAL AND START LEGAL PROCEEDINGS AGAINST YOU, AT YOUR EXPENSE, AND MAY ASSESS DAMAGES IN THE AMOUNT OF \$1000.00 AGAINST YOU. YOUR FAILURE TO COMPLY WITH ANY OF THE ABOVE TERMS OF THIS AGREEMENT WILL RESULT IN THE ANIMAL RETURNING TO ANY OF THE ABOVE-MENTIONED OR THEIR REPRESENTATIVES. PAWZ PATROL RESCUE RESERVES THE RIGHT TO RECLAIM THE ADOPTED ANIMAL IF THE ANIMAL IS NOT BEING TREATED HUMANELY OR IS ABUSED. THIS WOULD INCLUDE BUT IS NOT LIMITED TO INADEQUATE FOOD, WATER, SHELTER, VETTING, SOCIALIZATION, AND EXERCISE.

I HAVE READ, UNDERSTAND, AND WILL COMPLY WITH ABOVE STATED CONDITIONS.

(Signature)

(Date)

(To be complete by Pawz Patrol Rescue)
Approved by:

(Print Name)

(Signature)