



Application for Adoption

GreenDog Foundation
PO Box 2473
Capistrano Beach CA 92673
(951) 609-0765
www.greendogfoundation.org

Date: _____

Name of Dog: _____

Name of Applicant: _____ Occupation: _____

Spouse/Significant other: _____ Occupation: _____

Is he/she aware of and agreeable to this pet adoption? _____

Names and ages of children (if any): _____

Have the child(ren) been told of the responsibilities owning a pet entails? _____

Home street address: _____

City: _____ Zip: _____

Home phone: _____ Cell phone: _____

Work phone: _____

Email address: _____

Emergency contact (name & phone number): _____

1. Type of dwelling: House _____ Condo _____ Apartment _____

2. Do you have a fenced yard? _____ Other? _____

3. Do you own? _____ Rent? _____ If renting, do you have permission from _____

- your landlord to have this pet? Yes _____ No _____
- Landlord's name and phone number: _____
4. What are your primary reasons for wanting a dog/cat? Companion _____
- For your children _____ Gift _____ Watchdog _____ For another pet _____ OTHER _____
5. If you have children, please describe their previous experience with dogs/cats: _____
6. Other pets (name, breed, sex and age of each):
- Dogs: _____
- Cats: _____
- Other: _____
7. Are your pets spayed and/or neutered? _____
8. Is there anybody home during the day? _____ Who? _____
9. When will the dog/cat be inside? _____ Outside? _____
- Will the animal be crated? _____ If "yes", please explain: _____
10. How many hours per day will the dog/cat be left alone? _____ Where will it be kept when left alone? _____
11. Where will the dog/cat sleep at night? Dog house _____ Garage _____
- Laundry room _____ Kitchen _____ Master bedroom _____ Child's Room _____ Bathroom _____ Other (explain) _____
12. Do you have a doggie door? Yes _____ No _____
13. Do you have secure fencing? Yes _____ No _____ Gate(s)? _____

14. Have you recently inspected your fence and is it secure, without holes, gaps, or low points? Yes _____ No _____ (If NO, before your application is accepted, please thoroughly inspect your fence and make any necessary repairs before the home visit.)
15. Do you have a pool? _____ If YES, is there a secure fence around it? _____
16. Who has access to your yard? Gardener _____ Pool Man _____
Housekeeper _____ Utility _____ Neighbor _____ Other _____
17. Preferred level of exercise with dog? Couch potato _____ Short walks _____
Vigorous walks _____ Hike/jog _____
18. How do you normally walk your dog? On leash _____ Off leash _____
19. When on leash, I normally use: Collar only _____ Choke chain _____
Harness _____ Gentle leader _____ Other _____
20. When you go on vacation or are gone for an extended period of time, who will care for the pet(s)? _____
21. Do you have a regular Vet? Yes _____ No _____
If YES, Vet's name and phone number: _____
22. How would you rate your level of dog/cat owning experience?
1st time owner _____ Beginner _____ Intermediate _____ Advanced _____
23. How will you train this dog/cat? Obedience class _____ Hit with newspaper _____
Firm verbal command _____ Clicker/hand signals _____ Other _____
24. Are you willing to live with hair on the furniture and your clothes, stains on your rugs, a warm body on your bed, and an animal that might be destructive at times?
Yes _____ No _____
25. Pets are an investment of your time and money. Can you afford to provide the

required and proper medical care, grooming, proper diet, shelter and exercise for your new pet? To provide proper medical/veterinary care, including yearly checkups, vaccinations and heart-worm prevention medicine, as well as veterinary care for unusual symptoms such as loss of appetite, coughing, vomiting, diarrhea, blood in urine/stool, allergies, skin conditions, lethargy? Yes_____ No _____

26. Are you able to make a long-term commitment to care for your pet for its entire life span, which could be as much as 10-20+ years? Yes _____ No _____

27. Have you ever given a pet away? If so, please explain _____

28. Which of the following reasons might prompt you to give up your dog/cat? Mark all that might apply:

Excessive barking _____ Biting _____ Digging _____ Moving _____

Shedding _____ Divorce _____ Illness _____ Allergies _____

Poor watchdog _____ Destructive chewing _____ Excessive vet bills _____

Financial problems _____ Accidents indoors _____ New spouse or partner

doesn't like pet _____ Aggressive on leash _____ New family addition _____

Growling at guests/family members _____ None of the above _____

Other _____

29. Will you agree to consult and pay for a trainer or behaviorist if problems develop?

Yes _____ No _____

30. Will you agree to register the dog with, and obtain a dog license from the municipality where you live or as required by law? Yes _____ No _____

31. Will you agree to NOT give or sell the dog to another person, relative, rescue group, humane association, shelter or pound, or any medical or experimental laboratory or similar organization? If you feel the need arises to re-home your pet, you will notify GREENDOG FOUNDATION immediately? Yes _____ No _____

32. Will you agree to notify GREENDOG FOUNDATION (951) 609-0765 immediately if your pet is lost and to make every reasonable effort to recover the dog/cat?
Yes _____ No _____

33. Please list pets that you have owned since you have been an adult?

	<u>ANIMAL</u>	<u>LENGTH OF OWNERSHIP</u>	<u>WHAT HAPPENED?</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

34. Why are you interested in adopting from a rescue? _____

35. How did you hear about Green Dog Foundation? _____

Please read and initial each statement below:

I understand that a home visit is required prior to final placement _____ (initial)

I understand that a home visit does not guarantee placement _____ (initial)

I agree to provide my own collar, leash, choke chain or harness, and **personal ID** at the time of completing the adoption contract _____ (initial)

I can _____ cannot _____ make a donation of \$325 for an adult dog / \$425 for altered dogs up to 1 year / \$425 for unaltered puppies with an additional deposit of \$100 that will be refunded when the puppy is spayed or neutered. This is a tax deductible donation and goes to the medical needs of the dog. Anything over that amount will help with medical care, spay and neuter, board and placing other abandoned dogs (the inability to make a donation does not disqualify an applicant from consideration).

I understand that any donation or contribution is a gift freely given, not a purchase price for a dog _____ (initial)

_____ Date: _____
Signature of Adopter

Print Adopter's Name

ANY OTHER DEAL POINTS:

1. _____

2. _____

3. _____

_____ (Initials of adopter) _____ (Initials of rescuer)