



FOSTER FRIENDS RESCUE

Fosterfriendsrescue@gmail.com

ANIMAL ADOPTION APPLICATION

Completion of this application does not guarantee adoption of a rescue animal.

Date: _____ Interested in which dog/puppy? _____

Name of applicant _____

Occupation _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Fax _____ Work Phone _____ Cell Phone _____

Email Address _____ How many people in the household _____ Adults _____ Kids _____

Which age bracket applies to you (18-25) _____ (26-35) _____ (36-45) _____ (46-65) _____ (65+) _____

What are the ages of kids in the household? _____

Personal Reference _____ Reference phone _____ Years Aquainted _____

Do you live in a House Apartment Condominium Town House Other _____

Do you Own Rent If you rent, do you have your landlord's permission to have a pet? Yes No

Landlord's Name and Phone Number _____

Please list the other animals in the home _____

Are they spayed/neutered _____ Current on shots _____ Any medical issues _____

How much of the time will the dog be outdoors?

How much of the time will the dog be indoors?

About what percent of the time will the dog be left alone?

Where will the dog be when left alone?

What area(s) of the house will the dog be allowed?

Where will the dog sleep at night?

Do you have a fenced yard? Yes No If so, how high is the fence?

Type of fence? other _____ Are the gate(s) normally locked? Yes No

Do you have a pool? Yes No If so, is it fenced separately from the yard? Yes No

Why do you want a dog? (Check all that apply-see next page for options)

House pet Companion for family

Companion for other pet Companion for children

Protection for home/family Protection for business

Watchdog As a gift

Other (specify) _____

Other pets (specify number of each): Dogs _____ Cats _____ Other _____

What pets have you had in the past?

What happened to the ones you no longer have?

What would happen to the dog if you moved locally?

Out of state?

Out of the country? _____

Do you have a regular veterinarian? Yes No If so, vet's name:

Name of Clinic: _____

Does anyone in your household have allergies: Yes No What kind? _____

How would you train this dog? (Check all that apply)

Obedience school Hit with newspaper

Firm verbal commands Clicker/hand signals

Other (specify) _____

Will you be able to live with hair on your furniture, stains on your rugs, a warm body on your bed, and an animal that might be destructive at time? Yes No

Remember, pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, proper shelter and exercise for your new pet? Yes No

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 to 20 years? Yes No

Under what circumstances would you not be able to keep this dog?

Do you have a problem with returning the dog to Foster Friend Rescue if your lifestyle should change or you could no longer properly care for the dog? How did you find out about Foster Friend Rescue?

Which dog/puppy are you interested in adopting, should this application be approved?

Why do you feel this would be the best choice for you/your family?

Our dogs are in our homes, socialized, exercised daily and come with various levels of training. They are Micro Chipped, current shots and Rabies; they have been de-wormed and treated with a monthly topical flea treatment. We have certain protocol for certain dogs. If protocol is not followed by the adoptee, this is a cause for concern for the best interest of the dog. We stay in touch with our adoptees, to ensure a smooth transition for the dog and you. We are here for you every step of the way. We offer an hour and a half of FREE training to each adoptee, which is usually provided in two 45 minute sessions. If you are approved to adopt from Foster Friend Rescue, do you agree to have open communication with Foster Friend Rescue with updates on the dog's progress, reasonable amount of time to return phone calls from us and send pictures every so often to keep us in the loop on your happiness with the dog? Yes No

Your signature below serves as an acknowledgment that this is a sincere inquiry, and that all the information provided is true and complete.

Signature _____ Date _____

We reserve the right to refuse adoption to any Client for any reason.

This questionnaire becomes part of our contract when you are approved for adoption of one of our puppies/dogs.