ADOPT-A-PET PET RESCUE DOG APPLICATION FORM

v3.8

|  |  |
| --- | --- |
| **Name of Dog Applied For:** |  |

**PREAMBLE**

This comprehensive application has been developed by animal care professionals and rescue volunteers in order to ensure the dog you are interested in is a potential match for you and your family ***before*** visitations begin. Please complete this application in full, after you have considered all aspects of whether or not the animal you are applying for is an appropriate animal for you... for life.

**\*\*\* We do not Adopt Out of Ontario Canada \*\*\***

*Please complete all sections on your computer . Tablets and other electronics can prove to be difficult or one has to update their software for the program/ file/ adobe program to work. Once complete, save and email to us as an email attachment.****Incomplete applications will not be reviewed or considered.***

***PLEASE DO NOT SCAN OR CHANGE FORMAT OF APPLICATON { . doc }. We are not on high speed and are charged by data usage.***

*Thank you.*

**By placing an X in the column below, I am indicating that I understand and agree to comply with*:***

|  |  |
| --- | --- |
| We are not a boarding facility.You agree that by submitting this application - that if you have not disclosed any intent to delay the adoption before the viewing or home visit, (unless you have already made previous arrangements with the rescue to facilitate this delay an adoption),‎ that you understand additional boarding costs will be incurred - as other incoming dogs will be stuck in boarding while the foster home "boards" your pet. |  |
| I have carefully considered the commitment required to care for a dog for its entire life and am ready to proceed with the adoption process as outlined in Pet Rescue’s policies as noted on their website |  |
| I/we have full reviewed/ read the PetRescue Policies and Procedures |  |
| I /we understand that the rescue only considers and 100% commits to one approved application at a time. We confirm we have no other APPLICATIONS/VIEWINGS OR dogs for consideration elsewhere . I/ we are committed 100% to the process & AGREE not TO waste the time/ gas of the rescue volunteers for viewings, home visits to then back out . |  |
| The dog will require time each day for interaction, exercise, training and grooming |  |
| I am committed to responsibly providing for the dog’s needs for the rest of its life – which may exceed 15 years |  |
| I may have to housetrain or train my pet, which requires time, patience and sometimes professional assistance |  |
| Transition takes a minimum of one month, often longer |  |
| We understand that Rescue is highly committed and only approves/ commits to one application at a time to be fair to the time invested by each applicant. If I am approved- this means all other applicants have not been selected/ approved . |  |
| Everyone who lives in our home and existing dogs must attend the initial viewing at the foster home and agree to the adoption. You will give notice to the rescue within 24 hs of your intentions to move forward or decline when offered an initial viewing . |  |
| Pet Rescue will not complete same day adoptions d/t impulsiveness and for the welfare of the pets. |  |
| Pet Rescue will not release the adopted pet to anyone but the approved Applicants. |  |
| I/ we understand that the dogs are in various foster homes , may not be in the local area to where I/we live .We are committed and confirm I/we are committed to drive the distance for the viewing/s and the following adoption date as arranged. We acknowledge that we have reviewed and are aware of the distance for any pending traveling to complete the adoption process. We understand/accept this and acknowledge that this will not be a issue to back out thus costing the pet to miss out on other applications that have moved on.\*\* IF DISTANCE WILL BE AN ISSUE- PLEASE DO NOT APPLY. OUR PROCESS IS FIRM AND WE DO NOT CUT CORNERS FOR THE SAFTEY OF OUR PETS WE PLACE … SO DO NOT ASK ABOUT SAME DAY ADOPTIONS. \*\* |  |
| Pet Rescue will not adopt dogs into homes with existing intact { meaning they have not been spayed or neutered } . This is for the welfare of the Animals. |  |
| Rescue will not place adoptive dogs into homes with existing dogs that may have extensive behavioural issues. This is for the safety of the adoptive pet. |  |
| This application does not guarantee an adoption based solely on a received application – all animals will be placed in homes which suit their needs according to Pet Rescue’s experienced evaluation – not first come, first served. |  |
| Pet Rescue reserves the right to deny any adoption for the sake of an animal’s welfare. Rescue may make recommendations for an alternate pet that would be better suited |  |
| I will welcome a home visit by a Pet Rescue representative to ensure my home meets this dog’s needs |  |
| False, misleading or omitted relevant information will be cause for denial of this application and could result in termination of an adoption (without refund) |  |
| Upon substantiated abuse or neglect, Pet Rescue will confiscate the pet (without refund) |  |
| For “ Foster to adopt Placements “ :We the adopters agree that this pet { if under age to be vetted and If this is a foster to adopt placement } will be fully vetted at the designated rescue vet location in following rescue protocol , follow-up care. Any issues must be discussed with rescue before “ foster to adopt “ placement. |  |
| A specific Pet Rescue donation and an adoption contract, signed at the time of adoption at the foster home, will be required. Payment is to be set by E- interact banking transfer unless otherwise arranged. |  |
| The foster parents of the dog I am interested in, as well as the founder and coordinator of this rescue, will review my completed application. |  |
| All completed applications become the property of Adopt-a-Pet/Pet Rescue and will be retained in its files |  |
| At anytime should this adopted pet need to be rehomed it will be returned to rescue . I / we the adopters will make the needed arrangements and implement them to ensure the return the adopted pet to the immediate care of Petrescue and to the arranged and designated location. |  |
| We agree Full adoption fee is applicable to be paid at the time of / before adoption to petrescue@hurontel.on.ca via e-transfer or otherwise as arranged. Partial fees are not acceptable as has the rescue then incur additional costs/ fee’s for vetting fees due.. Adoption not finalized without full adoption fee paid. |  |
| Upon the approval and completion of this adoption : I/ we agree & commit to :**1 .** update the rescue at : 1st night/ Day: End of weeks – 1 thru 4:Monthly for a year: Then yearly.This is to offer supports and to ensure any issues are addressed asap and not permitted to escalate.We also are committed to the pets we help not only when they are with us but when placed. We love to hear how they are doing and see brag photos. |  |
| **2.** I agree to advice the rescue of any digressions in health or mental wellbeing, and of behaviour |  |
| **3.**I agree to always have the rescue tag on the pet for its lifetime, in addition to a tag with my info on it |  |
| **4.** I agree to inform the rescue if my email, phone, cell phone or address changes over the lifetime of the pet |  |
| **5.** I agree to ensure the dogs independence by coming and going during transition and allowing the pet enough alone time that they do not become dependant on 24/7 companionship |  |

**SECTION 1: Contact Information**

|  |  |
| --- | --- |
| Date: |  |
| Applicant(s) Name: |  |
| Address: City |  |
| Address: street |  |
| Address:Postal Code |  |
| Home Phone #: |  |
| Cell Phone #: |  |
| Home email: |  |
| Occupation: |  |

**References & Emergency Contacts**

Your references are strictly for confirmation & emergency contact only and will not be shared.

**\*\* Please provide 2 full reference Contacts for each Adult Applicant \*\***

**{ Must not be Blank & no co-applicants as references }**

|  |  |
| --- | --- |
| Applicant #1Next of Kin Name:Address-Phone- Email |  |
| Applicant #1Reference Name:Address-Phone- Email |  |
| Applicant #2Next of Kin name:Address-Phone- Email |  |
| Applicant #2Reference Name :Address-Phone- Email |  |

**SECTION 2: Home Profile**

|  |  |
| --- | --- |
| Is your home detached, semi-detached, townhouse, apartment or other? |  |
| Ownership (own, condo, rent)*If renting, Landlord contact name and number:* |  |
| Neighbourhood type (i.e. urban, suburban, village, rural): |  |
| How far do you live from the road? |  |
| Approximate yard (or accessible green space) size? |  |
| How will you confine your pet outdoors:*Fence: type & height- is the yard completely enclosed?**Kennel Run- What is it made of, and what size is it?**Garage; Porch; Leash; Chain/Tie-out/Runner; or Other, please explain:* |  |
| If you do not have a fence, how will you proceed with potty breaks and exercise when you’re ill, tired, or in inclement weather? |  |
| Do you have a swimming pool? *If yes, is it fenced so the animal cannot access it?* |  |
| How do you feed, weed and pest proof your lawn or garden? |  |
| Do you have any potential physical hazards on or adjacent to your property (creek, ravine, sink hole, etc.)? |  |
| Do you have any potential health hazards on to your property ? ( groomed Mulch , poisons Plants )? |  |
| Would you consider your level of socializing with guests in your home to be - None- Minimal- Daily -Weekly/ weekends |  |
| Do you understand newly adopted dogs need time to settle { a min of a month } before having guests in or taking them to multiple homes or a cottage to visit? |  |
| Do you regularly attend or own a cottage / trailer/or campground site that you frequent and entertain/socialize at ?1. Would the dog be in attendance?2. if Yes what frequency? weekends- summer events3. What level of personal entertaining /socializing would there be? –A. NoneB. Minimal { a couple people : less than 6C. a lot { over 6- 10 } Daily /Weekly/ or weekends |  |
| Are their children in neighboring yards ? or is there be children in your neighborhood that the dog would have exposure to? If yes when / how often? Ages ? Personality- shy- active- loud |  |
| Do any Neighbourhood children come into your home or yard without notice/ permission? |  |
| What type Is your area where you live-1. An active Neighbourhood? Busy neighbours/ kids ?2. Middle activity3. Quiet- minimal activity |  |

**SECTION 3: Adoptive Family Profile**

|  |  |
| --- | --- |
| Does anyone have concerns or hesitations about adopting this dog? *If yes, what are they?* |  |
| How long at current address? |  |
| How many times have you moved in the last 5 years? |  |
| When are you planning on moving next? |  |
| How many people reside in your home? *Please list by name, age and activity level.* |  |
| Who will be responsible for taking care of the dog? |  |
| Do you have children visiting your home? *List ages and frequency of visits:* |  |
| Are the children in or visiting your home used to, and respectful of, pets?*Describe their typical behaviour with pets.**What behaviours/ interactions will you permit visiting children and adults to direct to your new pet.?**What interactions do you feel a pet should tolerate/ be accepting of**#1 – from family members?**#2 - from Visitors/ strangers ?* |  |
| Does anyone in your home - or anyone that visits your home - have animal allergies? *If unsure, have you ever exposed this friend/family member to pets similar to this one for more than a day?* |  |
| Are there any babies expected in the near or distant future for the household? |  |
| What is your emergency care plan *(in the event of your illness, injury or death)* for the dog? As to who will care for your dog.Who is your Co-adopter ?- Family/ friend .Are they fully prepared and committed to take on the care of this pet should the need arise ?Contact info for emergency only. Name: Address/ city/ street Phone: Email: |  |
| Do you have ? / What is ? your plan in the event that one/ both / all Caregivers in the pets home must be placed in short-term or long-term care outside the home. ? |  |
| Do you wish to adopt this pet as a gift? *If yes, for whom and their relationship to you?* |  |
| Describe how children and guests in your home are to interact with dogs:*While they are eating**While they are resting**While they are playing with toys**How do they generally greet dogs* |  |
| Do you have dogs visiting your home? *List by name, disposition, energy level and sociability.* |  |
| When is your next anticipated vacation/trip? *How long will you be away?* |  |
| What will you do with the pet while you are away? *If boarding, provide name of kennel. Would you like a referral for boarding?* |  |
| **SECTION 4: Pet Ownership History** |  |
| Do you have any other current pets?*List by name, species, age, sex (and if fixed or not), how long they have lived with you, indoor or outdoor pet, age at death, and if deceased - cause of death:* |  |
| 1. What type of energy is your existing dog? – Low- medium- high?2. What type of play style does your dog have? – Minimal- soft- medium- active- Rough? |  |
| Do/did your animals have full (combo and rabies) vaccinations and flea treatments? *If holistic, please describe method:* |  |
| Do your current pets get along with dogs of all sizes and breeds? *If no, describe their reactions/concerns:**1.* Off your property on leashed walks etc?*2.* At off leash parks?*3.* Having strange dogs on its home turf? |  |
| Have your pets displayed any of the following behaviours with humans or animals: dominance; aggression; possessive of food/toys/space; protective of you/your family; or other reactions? *Describe in detail and how you deal with it. Have you been successful with this approach?* |  |
| Have you lost a pet recently*? If so, when and how? How do you know that you are ready to welcome a new pet into your life?* |  |
| Have you ever given up any of your animals (re-homed)? *If yes, why?* |  |
| Have any of your animals ever been picked up by animal control or have you been warned/ spoken to by animal control *If yes, why?* |  |
| Have you ever been ordered to confine or euthanize a pet by the authorities? *If yes, why?* |  |
| Do you plan on adopting other pets in the near future? *If yes, describe*: |  |
| Do you have any viewings or interviews set up elsewhere? *If yes, where?* |  |
| Have you ever been declined an adoption from anyone? *If yes, why?* |  |
| Have you ever adopted a pet before? I*f yes, provide details*: |  |
| Have you ever returned an adopted dog? *If yes, why?* |  |
| Has anyone in your home ever been bitten by a dog? *If yes, please provide specific details of the incident:* |  |
|  |  |  |

**SECTION 5: Preferences**

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| --- | --- |
| What is your time frame for adopting this dog? |  |
| Are there any known circumstances that may delay the finalization of this adoption more than 2 wks ? If Yes.. what? & time frame ?If Yes - Please note additional costs will be incurred for boarding this adopted pet. |  |
| Size preferred: (X-Sm 1-9 lbs, Sm 10- 25 lbs, Med 26-40 lbs, Lg 41-80 lbs, XL over 80 lbs) |  |
| Gender Preference: |  |
| Age preference (newborn, pup, teenager, young adult, mature, senior): |  |
| Energy level preference (couch potato, a little active, moderately active, very active)? |  |
| Coat preference (hairless, short hair, medium hair, double coat, long hair): |  |
| Why do you want a dog, in general (companion, agility, therapy, hunting, guarding)? |  |
| If you could have any breed would this be your 1st choice?*If not, what breed do you prefer, and why are you not pursuing that option?* |  |
| Why are you applying for this dog specifically? |  |
| Have you researched this breed(s) in particular? *If yes, very specifically how?* |  |
| What traits and behaviors are you expecting in a newly adopted dog (good with dogs/cats/kids, vocal/quiet, playful, attentive, other etc .)? |  |

**SECTION 6: Veterinary & Health Care Profile**

|  |  |
| --- | --- |
| Do you have a veterinarian?*Vet’s Name:**Animal Hospital Name:**Address:**Phone Number:**Fax Number:**Under what name(s) are the pets’ records?:* |  |
| May we contact them if your application is approved for a viewing or adoption? *By indicating so, I authorize the veterinarian listed above and their agents to release to Adopt-a-Pet Pet Rescue Lucknow any information pertinent to evaluating my history of pet ownership.* |  |
| If you don’t currently have a vet, would you like a referral to a vet in your area? |  |
| What are your monetary expectations for the pet’s care for the first year in the following categories?:Food:Flea/Tick/Mange prevention:Heartworm prevention:De-worming:Vaccinations:Treats:Emergency Vet Care*(e.g. vomiting, injuries, etc.)*Grooming:*(e.g. brushes, shampoo, or grooming fees)*Other:Total | **$****$****$****$****$****$****$****$****$****$****$** |
| What do you plan on feeding the pet? *Please name a specific brand of food, amount and feeding times.* |  |
| Describe the differences between poor and good quality dog food and the impact on a dog’s life: |  |
| If a special diet were required in the future would you be willing to pay the extra price? *If yes, what if any amount would you consider being excessive?* |  |
| Do you plan on using the B.A.R.F. diet / Raw Diet ? |  |
| Do you plan on feeding real bones or rawhide? |  |
| If the pet becomes seriously ill or injured and your veterinarian says expensive medical treatment is needed, what will you do? |  |
| Is there a dollar amount that you feel is too much to spend for an emergency or necessary medical treatment (e.g. surgery)? | **$** |
| What methods would you consider to end your pet’s life?*(when recommended by a veterinarian or otherwise required)* |  |
| Do you plan on continuing flea, heartworm, tick and ear mite prevention once a month from April - October every year? *If not, what will you use?* |  |
| On what timeframe will you have the pet de-wormed and which product will you use? |  |

**SECTION 7: Pet Lifestyle Profile**

|  |  |
| --- | --- |
| How much time are you willing to commit daily to your pet? |  |
| Where will your pet usually be? *If outdoors, describe the pet house, shelter or access to a building:* |  |
| How much time do you think this animal will require for grooming on a daily/weekly basis? |  |
| Please describe how the grooming regimen for this dog will change between the seasons. |  |
| Where would this dog be when you are out of the home during the day? And the night? |  |
| Where would this dog be when you are at home during the day? And the night? |  |
| What would a day in the life of your pet be like? *Please describe your preferred routine (i.e. waking up, going for a walk or run, having breakfast, etc.)* |  |
| On an average day how long would the pet be left alone? |  |
| How much time will the animal be allowed outside (yard or dog run) each day? |  |
| How much time will the dog be on leash for walks with you or a family member each day? |  |
| How much time will the dog be off leash for play time or socialization each week? |  |
| Will you normally walk your dog on-leash or off-leash? |  |
| Which equipment do you plan to use for walks (Halti, Gentle Leader, Harness, Choke Chain)? *Other methods, please describe:* |  |

**SECTION 8: Training Profile**

|  |  |
| --- | --- |
| My experience with dogs includes:How old were you when you had pet/s? And what age was the pet/s you got/ lived with ? |  |
| Have you ever taken a puppy/obedience/animal behaviour course? If yes.. Where /when/ how long ago |  |
| Are you committed to attending training classes with this pet – for bonding and update training ? If yes: What trainer? describe where, when, topics to be covered, etc. |  |
| Do you have experience with this breed/ breed mix? *If yes, please describe:* |  |
| Describe what you would do if a dog growls:Over their :1. Food2.treats/toys3.space4. Space /couch/ bed ?*At you/your children**At another pet**At visitors**At people/pets outdoors* |  |
| Do you plan on crating/crate training? If NO.. how will you ensure your pets safety when alone/ unsupervised.? |  |
| Describe the process of how you would housetrain a dog. |  |
| How would you correct the pet if it eliminates in an inappropriate place? |  |
| Do you feel showing or exposing an animal its waste is appropriate? |  |
| How would you get the dog to drop an item it should not have? |  |
| How would you prevent the animal from chewing on items? |  |
| What would you give a teething animal to relieve its discomfort? |  |
| Will there be rooms / areas are off limits to the dog (example: kitchen)? *If yes, what method will you use to keep the animal out of the undesired areas?* |  |
| Will you boundary train Outside and inside your home ? *If yes, Where- what areas and how?* |  |
| Would you allow roaming freely after you feel it has recognized its property boundaries? *What timeframe do you feel is appropriate to allow this to happen?* |  |
| How would you prevent car chasing? |  |
| How would you correct a dog when it barks or jumps up on children or guests? |  |
| How will you correct the dog if it misbehaves? *What would you do if the undesirable behaviour continued?* |  |
| When traveling in a vehicle, where would the pet ride? |  |
| If the dog became lost, what steps would you take? |  |
| Will you be able to keep the pet under all circumstances? *If no, under what circumstances would you NOT be able to keep this dog?* |  |
| If you could no longer keep the pet due to unavoidable circumstances, what would you do first? |  |
| What time frame do you think it will take for a new pet to transition and settle into your home?How much time are you willing to give your pet to transition before returning to rescue?What will you do to resolve separation anxiety that may develop in your newly adopted pet ? |  |

Place an X in the boxes as appropriate for each situation listed on the left:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Situation* | *willing to work through* | *might prompt me to re-home* | *not willing to work on* | *doesn’t matter* |
| got too big |  |  |  |  |
| new baby |  |  |  |  |
| rough with kids |  |  |  |  |
| poor watchdog |  |  |  |  |
| destructive chewing |  |  |  |  |
| jumping up |  |  |  |  |
| Barking |  |  |  |  |
| Digging |  |  |  |  |
| Shedding |  |  |  |  |
| housetraining errors |  |  |  |  |
| Chewing |  |  |  |  |
| territorial marking |  |  |  |  |
| territorial barking |  |  |  |  |
| territorial for toys/food/bed |  |  |  |  |
| difficult to walk |  |  |  |  |
| needs too much exercise |  |  |  |  |
| too hyper |  |  |  |  |
| too lazy |  |  |  |  |
| aggressive to other animals |  |  |  |  |
| Mouthing |  |  |  |  |
| biting |  |  |  |  |
| Growling |  |  |  |  |
| scratches floors |  |  |  |  |
| gets into garbage |  |  |  |  |
| unable crate train |  |  |  |  |
| reaction to strangers |  |  |  |  |
| won’t stick around |  |  |  |  |
| chases cars, etc. |  |  |  |  |
| health problems- medical/ mental/physical |  |  |  |  |
| separation anxiety |  |  |  |  |
| moving to a place that will not allow them |  |  |  |  |
| extended family moving into your home |  |  |  |  |
| old/new pet does not like the new pet |  |  |  |  |
| divorce |  |  |  |  |
| loss of job/ financial problems |  |  |  |  |

**SECTION 9: If this adoption is approved…**

|  |  |  |
| --- | --- | --- |
| Would you plan on changing the dog’s name? *If yes, to what?* |  |  |
| Bringing it a new collar? *If yes, what kind/brand of collar?* |  |  |
| Bringing a leash, personalized ID tag, municipal tag? |  |  |
| Using a travel restraint (example: a seat belt harness)? |  |  |
| Would you have the pet micro-chipped (if not already)? |  |  |
| Would you leave the Pet Rescue I.D. tag on the collar? |  |  |
| Are you familiar with your local animal control by laws requiring pets to be licensed every year? *How many dogs are you permitted to own in your municipality?* |  |  |
| Will you have your dog licensed every year? |  |  |
| Do you have a trainer or animal behaviouralist with whom you will work? *If no, would you like us to provide you with a referral in your area? If yes, please specify name, phone number, website and address:* |  |  |
| Do you have ANY questions about our policies? *If yes, what are they?* |  |
| How did you hear about our Rescue? *Please note if you have spoken to one of our volunteers or attended a Rescue event and give name of the volunteer and event:* |  |

When would you advise Pet Rescue of the issues on the left (please place an X for all that apply):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | *ASAP* | *After seeing a professional* | *If it cost**money* | *If the dog is terminally ill* | *I wouldn’t inform the rescue* |
| Health concerns |  |  |  |  |  |
| Aggressiveness |  |  |  |  |  |
| Changes in behavior |  |  |  |  |  |
| Unacceptable behavior |  |  |  |  |  |
| Must re-home |  |  |  |  |  |
| If the dog becomes lost |  |  |  |  |  |
| If the dog must be euthanized |  |  |  |  |  |

|  |  |
| --- | --- |
| What would your first few days with the new pet consist of? |  |
| Are you willing to keep in touch regarding the animal’s health and progress? *How many times during the 1st year will you feel notify us of the pet’s progress?* |  |
| Are you willing to send us email and address and phone number changes? *If yes, for how long?* |  |
| Would you allow a follow-up visit from a representative of Pet Rescue? |  |
| What issues do you feel you need more info on?For example: housetraining; crating; toys; adjustment; intros to pets; children & pets; activity level; breed; treats, nutrition; activity level; obedience; vaccination; boundary training; micro-chipping; transition; other: |  |

*THE FOLLOWING 4 QUESTIONS ONLY APPLY TO ANIMALS THAT ARE*

*TOO YOUNGTO BE FIXED BEFORE THEY LEAVE OUR CARE.*

|  |  |
| --- | --- |
| When and where will you have this animal fixed?Animal Hospital Name:Animal Hospital Phone:Elapsed time from adoption to “fix” date: |  |
| Will you be able to be with the animal for the day of and following the procedure? |  |
| How much do you expect this to cost? | **$** |
| Are you willing to send us a receipt via mail? |  |

**Adoption Form Authenticity Agreement**

It is my intention to integrate this dog into my home and life as a pet and companion. I understand that adoption entails a commitment to provide for the pet0's physical, social and emotional needs for the rest of its life. I am over age 18, and I am ready to make this commitment. *By typing my name below, I certify that the above information is true.*

|  |  |
| --- | --- |
| Name: |  |
| Date: |  |

**The following are optional to help our rescue continue to help other animals:**

|  |  |
| --- | --- |
| Do you wish to be notified of any upcoming events? |  |
| Would you like to volunteer with us? |  |
| Do you know of/have a site where we can advertise events and sell raffle/event tickets? |  |
| Do you know of/have a company that would be interested in sponsoring an ad for us? |  |
| Do you know of a company who may be willing to donate goods or services *(i.e. grooming, veterinary care, training, kennel services, food, treats, crates, toys, beds, collars, leashes etc.)?* |  |
| Do you have a specialty craft/item you would be willing to donate for use in a fundraiser? |  |