

Dog/Puppy Adoption Application

DATE: _____

Dog Name: _____

The following information is requested so that we can assist you in the adoption of a new dog. Dog ownership is a serious commitment that may be expensive, time consuming and may require a mandatory training commitment as a condition of adoption.

In order to be considered as an adopter you must:

- Be 21 years of age or older.
- Have identification indicating present address.
- Have the knowledge and consent of your landlord.
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet.
- Be willing to allow us to do a home check

Completion of this application does not guarantee adoption of a pet.

About You

Name _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Dog Owner History:

Present dog(s) age, training history, spayed/neutered/health status? _____

Have you ever turned a pet into an animal shelter? YES/NO

If yes, please explain.

Please list the dogs you've had in the past, and where they are now:

Have you ever had a dog euthanized? YES/NO

If yes, please explain.

Are your present dogs able to sit, down and stay? ALWAYS SOMETIMES IT DEPENDS NO

You walk your present dogs on a leash:

DAILY (how long ___ Go at their pace daily ALWAYS _____) WEEKLY SOMETIMES

Do you have cats? Please list name, age: _____

Tell us about your home and backyard fencing:

Have you participated in training classes, enlisted the services of a dog trainer, or trained dogs yourself?:

Please explain _____

Training tools you're familiar with:

HARNESS HALTI MARTINAGLE COLLAR CHOKE CHAIN PINCH COLLAR ELECTRONIC
COLLAR CITRONELLA COLLAR BARK COLLAR MUZZLE

OTHER: _____

Name/Age of members of your household (list children under 7 yrs. old first):

Do you rent or do you own your home? RENT OWN

Landlord name/address/phone (must have landlord approval):

Time spent away from home per day: 0-3hrs 3-6hrs 6-9hrs Over 9 hrs :

When you're not at home, the dog will be: Circle one:

Crated Backyard Tied/Tethered Garage Free inside house Spare room Electric

The dog would sleep: OUTSIDE IN YOUR BED IN A DOG BED CRATED GARAGE OTHER: _____

Do you have a swimming pool? YES/NO Covered/Fenced? YES/NO

If you go on a vacation, who will care for the dog? _____

If you move, will you take the dog with you? _____

How much do you plan to spend per year caring for your dog?

How much are you willing to spend on medical bills for your dog? _____

What would you do if you had to go over this amount?

Are you willing to care for this dog for 10-15 years?

How much exercise (per day) do you feel is necessary to keep a dog healthy and balanced:

What activities would your dog share with you? DOG PARK HIKING RUNNING SWIMMING AGILITY BEACH
OFF LEASH CAMPING WALKING TRAINING CAR TRIPS WORKING OTHER:

What are your personal priorities in owning a dog? ENJOY AFFECTION WORK PARTNER

BASIC COMPANION FAMILY MEMBER GUARG DOG RANCH/FARM DOG OUTDOOR DOG

Do you feel some dogs are naturally good with children, and some aren't? YES/NO

How do you feel a dog should be corrected if they do something wrong?

By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in PETaluma PET Pals refusing adoption privileges to me/us. If my/our request for adoption is approved and later discovers the above information is not true or correct, PETaluma PET Pals reserves the right to remove the adopted cat from my home.

Signature _____ Date _____