



Dog Adoption Application

Pet name: _____ ID#: _____

Basic Information

Name: _____

Street address: _____

City/State/Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Email: _____

Employer: _____

How long at current job: _____

Provide two references that are not members of your immediate family:

Personal reference #1: _____ phone: _____

Relationship: _____ years known: _____

Personal reference #2: _____ phone: _____

Relationship: _____ years known: _____

About Your Home....

Do you live in a(n)?:

House

Townhouse

Apartment/ Condo

Other: _____

Do you own or rent?

Own

Rent

If renting, is your name on the lease? YES NO _____

If renting, do you have your landlord's permission to have a dog? _____

Landlord's name and phone: _____

List the **name and ages** of all residents in the household:

At what age do you feel children are responsible enough to take care of a pet without assistance? (i.e. walk, feed, train) _____

Does anyone in your household have an allergy to dogs that you are aware of?

YES NO

How many hours will your dog be alone each day? _____

Where will your dog spend most of his/her day when **you are home**?

indoors garage
 yard enclosed patio
 indoor/outdoor other: _____

Where will the dog stay when he/she is **home alone**? _____

When will the dog be inside? _____

When will he/she be outside? _____

Where will the dog sleep at night? _____

And your yard.....

I do not have a yard at this time (skip to the next section)

What outside areas are available to the dog? (check all that apply)

front yard dog house
 back yard garage
 enclosed patio other: _____

Do you have a doggie door? YES NO

Is your yard shared with neighbors? YES NO

Is your yard fenced? YES NO What is the type of fence? _____

Fence height? _____

Your Experience with Dogs.....

How would you describe your dog owning experience?

I have had dogs of my own as an adult
 I grew up with dogs or have worked with them but have not had my own as an adult
 I have never had one or have limited experience with dogs
 Other: _____

Have you ever had to give a dog away? _____

What were the circumstances? _____

Do you currently have pets? YES NO If yes, please complete the following:

Type Breed Gender Age Spay/Neutered? If not, why?

Who is your veterinarian (name and phone)? _____

About this dog.....

What kind of energy level are you looking for in a dog?

low (couch potato) medium high (very active)

Share your reasons for wanting a dog? (check all that apply)

- family pet gift for someone else protection/guard dog
 companion child's companion companion for another pet
 Other: _____

Do you plan on crate training your dog? _____

How will you exercise your dog? _____ How often? _____

What type of training are you interested in doing with your dog? _____

Have you or would you be willing to enroll your current dog(s) in obedience classes?

- YES NO only if I had problems

How would you discipline your dog if he or she misbehaved/ chewed household items? _____

What method do you intend to use to housetrain your dog? (check all that apply)

- Rub nose in offending spot Take out every couple of hours
 Crate training Consult professional
 Do not leave dog unsupervised
 Other: _____

If your dog develops behavioral problems, what will you do? _____

In which of the following situations might you allow your dog off leash?

- public park dog park beach
 hike neighborhood walk
 back yard front yard

Additional information.....

If your dog got out/ was lost, what would you do? _____

Pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, shelter, and exercise for your new dog? YES NO

Are you willing to take the dog to a vet within 7-10 days of adoption? YES NO

Do you understand that your adopted animal may require additional veterinary care as a result of being exposed to shelter related illnesses (i.e. kennel cough)? 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 long as 15 years or more? YES NO

Other concerns: _____

If you move, what will you do with your dog? _____

Which of the following reasons might force you to give up your dog? (Check all that apply):

excessive barking/ neighbor complaints aggressive on leash destructive chewing

biting/aggression digging divorce/separation allergies

shedding/ dirty not trainable poor watchdog moving/relocating

house-training problems financial problems growling/nipping at guests

excessive vet bills/chronic illness having a baby nips or bites children

new spouse/ partner doesn't like dogs pets aren't getting along

None of the above

other: _____

By signing below, I understand that the falsification or omission of any of the above information will result in automatic refusal of adoption or confiscation of the adopted animal- We maintain the right to refuse any application at our discretion. We maintain the right to complete a home check. I authorize HSWC to verify the validity of any information contained in this application. / hereby agree to release, discharge, indemnify and hold harmless the Humane Society of Wicomico County and any of its agents from any and all liabilities that may arise out of the handling by me and/or my party.

Signature: _____ Date: _____