

ADOPTION DONATIONS:

The MINIMUM donation for adopting an adult dog is \$350. The minimum donation for dogs under 1 year old is \$450.

Please note that we only accept Adoption Applications from those who live in the NY Tri-State area.

If you are applying for a specific pet, please enter the pet's name here:

ADOPTING A DOG

When you adopt a rescue animal, you are making a commitment to love and care for the dog, arrange regular vet check-ups for him/her and otherwise care for his/her health, solve behavioral problems, give praise, provide leadership, reduce stress, give plenty of exercise, good food, and not physically or emotionally abuse him/her for behaving badly. If need be, you must be willing to take him/her to an obedience training class to help establish your leadership and control over unexpected behaviors. This is what it takes to adopt a rescue. Now you must ask yourself--am I really ready??

ABOUT YOU:

Applicant's Full Name:				_ Age
Co-Applicant's Name (if any):			Age
Address:			Home Tel:	
Mobile:	Work Tel:	Email:		
Occupation:		Employer: _		
Work Address:				
Co-Applicant (if any):				
Mobile:	Work Tel:	Email:		
Occupation:		Employer: _		
Work Address:				
Do you (or Co-Applicant) work from home? Do you attend school?				
Have you ever been co	onvicted of a crime? _	If so, plea	se explain	
Why do you want to br the best home for this		ome, and why	do you feel your hom	e would be

If you should become ill, disable that person's relationship to you		vho will take ca	re of your pet, and what is	
Name:		Relations	hip:	
Address:		Phone Nu	Phone Number:	
Please list any companion anima	,			
Breed:	Age:	Sex:	Neutered:	
Should your adopted pet develop proper veterinary care and follow medications/special foods are re	w your vet's guide	lines, including		
Do you have the financial means	to properly care	for the pet?		
Would you consider buying pet in	nsurance?			
Will you assume all financial respregular veterinary care, good qu		. , .		
PET HISTORY:				
Have you had pets in the past? _	How ma	any years did yo	ou own your pet?	
Reason for no longer owning the	: pet(s)?			
Have any of your pets ever gotte	en lost? Poi	soned? l	Hit by a vehicle?	
Have you ever given a pet to a s	shelter?			
Please list any pets currently res	iding in your hom	e, with name(s), breeds(s) and age(s):	
Please describe pets you've had and your history with them:	in the past, (inclu	ding breed, and	d what training they had),	
PERSONAL REFERENCES:		1: 6:		
Please provide names, phone nu (see veterinary reference not		onship of two po	eople not related to you:	
1				
2				
VETERINARY REFERENCE: (If please add a third personal re			d have no vet reference,	
Veterinary's name, address, and	phone number:			

You will be required to complete an adoption contract if you decide to go forward with this adoption.

I agree, by signing below, that if I adopt a pet from **Woof Dog Rescue**, I will have him/her checked by my own veterinarian within (7) seven days of the adoption, and I will provide medical care, at my own expense, for any conditions previously unknown to **Woof Dog Rescue**, as well as routine yearly exams and necessary inoculations for as long as I own the pet. **Woof Dog Rescue** will provide a veterinarian's report which must be furnished to my own vet along with the papers provided to me from the shelter.

If there is ever a time when I am unable to care for this pet, or, if after a trial period, I find that the situation isn't working out, I agree to contact Barbara Fox of **Woof Dog Rescue**, who will take the pet back and find another home.

I understand and agree that giving false information in response to any of the questions above will disqualify me from adopting a pet from **Woof Dog Rescue**, **Inc.**, and will nullify all adoption(s) and/or adoption agreements between the applicant and **Woof Dog Rescue**.

Agreed and Accepted:				
Applicant Signature:	Date:			
Co-Applicant Signature:	Date:			