

RGHS DOG PRE-ADOPTION APPLICATION

PLEASE PRINT CLEARLY

Name		Date	
Address:		Apt/Unit#	Tel# Home
City	State	ZIP	Cell
			Work
Driver's License #		State	Email

Are you .. (check one) under 21 21-25 26-35 36-59 60+ Senior discount may apply

Are you a college student? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is everyone present today? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Who is not present today? _____
How many adults in the household?	Do you have children who visit? <input type="checkbox"/> Yes <input type="checkbox"/> No
How many children under 18? _____ Ages: _____	Have you adopted from us before? <input type="checkbox"/> Yes <input type="checkbox"/> No
What has happened to the pets you have owned in the past 5 years?	

RESIDENCE INFORMATION

Background checks are completed re: home ownership and rental approval.

Check one

Type of home Apartment Condo Military Housing House Live with Parents Other _____

Do you own your home? Yes No

For how long? _____ years _____ months

If you own your condo/town home please check with your homeowners' association regarding their pet policy

Do you rent? Yes No

How long have you lived at your current address? _____ years _____ months

Are there pet weight or breed restrictions? Yes No If yes, please specify _____

FAMILY INFORMATION

Check all that apply

Is this dog for? → Yourself Family Pet Companion for pet at home

Your children Gift Protection/guard dog

Who will ultimately be responsible for the feeding socialization and training of the dog? → **Please print clearly**

Under what circumstances would you not keep this dog? → **Please print clearly**

Note: RGHS will always take their pets back if needed and will place in a new home.

Check all that apply

Describe the personality of your ideal dog. → Active Mellow Cuddly Independent

Couch potato Social butterfly Athletic

Other _____

On a scale of 1-5 circle your Family's activity level

Couch potato 1.....2.....3.....4.....5 Super Sonic!

Would you like information on any specific behavior or training issues? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many animals do you have at home? Dogs____ Cats____ Rabbits____ Other____
If yes, please specify	

Please list all pets residing at your home (including roommate's pets)

Breed/Type	Age	Sex	Spayed or Neutered		Time Owned	Where is pet kept
		F M	Yes	No		
		F M	Yes	No		
		F M	Yes	No		
		F M	Yes	No		
		F M	Yes	No		

<p>Do any members of the family have allergies specific to animals? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>When outdoors how will the dog be confined? (check all that apply) <input type="checkbox"/> fence <input type="checkbox"/> zip-line, <input type="checkbox"/> invisible fence <input type="checkbox"/> chained <input type="checkbox"/> dog kennel <input type="checkbox"/> leash <input type="checkbox"/> Other _____</p>
<p>Time away from home (check one) <input type="checkbox"/> Mostly home all day <input type="checkbox"/> Out part time (4-6 hrs) <input type="checkbox"/> Away for 8 or more hours</p>	<p>Do you have a yard? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Type of fence _____ Height of fence _____ Note: A yard is not a requirement for adoption.</p>
<p>Please describe the specific location: Where will the new dog be kept when you are not at home? _____ Where will the new dog be kept when you are at home? _____ Where will the new dog sleep at night? _____</p>	<p>When do you anticipate these changes in lifestyle:</p> <ul style="list-style-type: none"> • Moving _____ • Having children _____ • Acquiring other pets _____ • Other _____

Name(s) of Dog(s) you are interested in meeting:

PLEASE READ THE FOLLOWING CAREFULLY

I hereby certify that the above information is true. I understand that any falsification discovered during the adoption process may result in the nullification of this adoption.

I understand that this dog may live 15+ years and I am prepared to give it the medical and emotional care and support that it needs. In addition, I understand that dog expenses ie food, medical care, vaccinations, licensing, training and supplies may average \$1,200+ annually. Adoptions are based on best match, thus this application may not necessarily result in the adoption of the animal(s) listed above. Please know that the staff at RCHS strive to achieve the most successful match for both dog and prospective family.

BY SIGNING BELOW I ACKNOWLEDGE HAVING READ THIS APPLICATION, ANSWERED ALL QUESTIONS AND FULLY UNDERSTAND THE RESPONSIBILITY OF ADOPTING A PET.

Applicant's Signature _____ **Date:** _____

TO BE COMPLETED BY RCHS STAFF

Date: _____ Staff Initials _____ Approved Denied

Comments: