










# The Canine Collective

*Providing a second chance for your new best friend*

## Adoption Application



Please read and sign before filling out the application

-  You must be 21 years of age.
-  You must be willing to make a 10-20 year commitment to the dog.
-  We do not adopt out dogs as gifts.
-  All dogs will be indoor companions. You must have a secure fenced yard or be committed to multiple daily leash walks in all kinds of weather.
-  If you are living in a rental property you must provide written proof of landlord approval.
-  All current pets in the household MUST be spayed/neutered and current on all shots. Veterinarian references are verified.
-  Our adoption contract legally binds you to provide the dog with proper veterinary care, including a yearly wellness exam, up-to-date required vaccinations and emergency care if necessary. You will also keep the dog on monthly heartworm prevention.
-  Our adoption process intentionally takes several steps and cannot be completed in one day. The process may take a few days from the time you submit an application to the time the dog will be in your home.
  
-  **IMPORTANT:** Expect a 7-14 day adjustment period for your new dog. Our dogs have been through some recent changes in their lives and need a chance to adjust to their new surroundings.

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I am interested in adopting (please list up to 3 dogs you are interested in. If you are interested in just 1 dog, do not list others) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

### 1) Personal Information:

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Driver's License#: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Own:  Rent:  Landlord Name: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_

You must provide written proof that you are permitted to have pets

Your Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_

**2) Other Household Members**

Full Name of Household Member	Age	M/F	Animal Allergies Y/N

**3) Current Household Pets**

Name of Pet	Type of Animal & Breed	Age	Sex	Weight	Length Owned	Date of last vet check/vaccination

**Note: All pets in home MUST be spayed or neutered with current vaccinations**

**4) Veterinarian Information**

Please list the vet that has treated your current or past animals. If you do not have any animals list a personal reference that is a pet owner.

Clinic Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Other Veterinarians Used: \_\_\_\_\_

**5) Pet History**

List **previous** animals you or your family have owned in the past 20 years. Use additional section at bottom if necessary.

Name: \_\_\_\_\_ Species/Breed: \_\_\_\_\_ Years Owned: \_\_\_\_\_

How did you acquire this animal? \_\_\_\_\_

Why do you no longer have the animal? \_\_\_\_\_

How long ago was this? \_\_\_\_\_

If deceased what was the cause of death? \_\_\_\_\_

Name: \_\_\_\_\_ Species/Breed: \_\_\_\_\_ Years Owned: \_\_\_\_\_

How did you acquire this animal? \_\_\_\_\_

Why do you no longer own the animal? \_\_\_\_\_

How long ago was this? \_\_\_\_\_

If deceased what was the cause of death? \_\_\_\_\_

Please provide any additional information on your pet history

**6) General Questions:**

1. Do you have a fenced outdoor area? If so please describe, If not explain how you will confine the dog to your property:

2. Where will the dog live, eat and sleep? Please explain fully:

3. How will you provide exercise/entertainment for the dog?

4. Please explain your method of training/discipline?

5. What will you do if your new dog chews, digs or displays some other forms of destructive behavior?

6. How many hours daily will the dog be left alone?

7. How will your dog be cared for while you are away?

a) at work: \_\_\_\_\_

b) on vacation: \_\_\_\_\_

8. Under what circumstances would you no longer be able to care for this dog? Check all that may apply.

- Family has to move
- Change in work schedule/No time for dog
- Marriage to someone who doesn't like dog or is allergic to dog
- Not enough room for dog in home
- Divorce
- New baby
- Children don't want the dog
- Current pets don't like new dog
- Family illness/Death
- Child went to college

- Someone in family is allergic to animals
- Dog is not housetrained
- Dog barks
- Dog digs
- Dog chews
- Dog has too much energy
- Dog pulls on the leash
- Dog becomes ill/medical expenses
- Too many other animals in the household
- Other:

9. Please describe the “perfect” dog for you. What characteristics/traits are you looking for? Long hair, short hair, specific color, specific sex, age. As you answer this, please think about your lifestyle - are you active, in and out a lot, are there lots of people/children around, etc., or are you more sedentary, quiet, with few visitors? What personality in a dog would best fit your family's needs and lifestyle? Would your dog go with you everywhere or stay at home with you a lot? Do you have other pets that need consideration?

10. Any Additional Comments

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For electronic signature please include your email address you are sending the application form. This will serve as your 'electronic signature'.

Note: We love all the dogs in our program and they will always have a home with us. If there are circumstances beyond your control, and you are unable to care for the dog, we will return a portion of the adoption fee. All adoption fees are used to help us to continue to save, vet and provide for our dogs.