



**Animal Rescue With a Heart**

## Dog Adoption Application

**\*Minimum Donation Required for Adoption:** \$250 for dogs 4 months and older  
**\*Minimum Donation Required for Adoption:** \$200 for dogs 8 yrs and older or special needs  
**\*Minimum Donation Required for Adoption:** \$300 for puppies less than 4 months of age

Date: \_\_\_\_\_ Name of Dog: \_\_\_\_\_

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

How many are in your household? \_\_\_\_\_ If there are children, what are their ages? \_\_\_\_\_

Do you live in a: \_\_\_\_\_ House \_\_\_\_\_ Condo \_\_\_\_\_ Apartment \_\_\_\_\_ Mobile Home \_\_\_\_\_ Other

Do you: \_\_\_\_\_ own \_\_\_\_\_ rent

If you rent, do you have your landlord's permission to have a pet? \_\_\_\_\_

If you rent, may we contact your landlord? \_\_\_\_\_ Yes \_\_\_\_\_ No Name and Phone Number of your landlord: \_\_\_\_\_

If a volunteer from Fur-Ever Home requested a home visit prior to adoption, would that be acceptable to you? If not, please explain: \_\_\_\_\_

Do you have a fenced yard? \_\_\_\_\_ Yes \_\_\_\_\_ No How high is the fence, if you have one? \_\_\_\_\_

What type of fencing is it? \_\_\_\_\_

**Fur-Ever Home**  
**647 Camino De Los Mares #108-263**  
**San Clemente, CA 92673**  
[info@fur-ever-home.org](mailto:info@fur-ever-home.org)  
[www.fur-ever-home.org](http://www.fur-ever-home.org)  
**(949) 444-9154**

**Revised 10/2017**

Will this be an indoor animal, outdoor animal, or both? \_\_\_\_\_

When the dog is outdoors, is there sufficient shade in the yard for his or her comfort? \_\_\_\_\_

What outdoor shelter will be provided for cold and/or wet weather? \_\_\_\_\_

Do you currently have any other pets? \_\_\_\_ Yes \_\_\_\_ No If so, how many, what species, breed, sex and age? \_\_\_\_\_

Are you aware of how to introduce a new dog to other pets in your household? \_\_\_\_\_

Have you previously had dogs as pets? \_\_\_\_\_ If so, what is their current disposition or history? \_\_\_\_\_

Are you or any of your family members in the household allergic to any animals? \_\_\_\_\_

How many hours a day will the dog typically be left alone? \_\_\_\_\_

Where will the dog be kept while he or she is alone? \_\_\_\_\_

When you travel, who will be responsible for the dog's care in your absence? \_\_\_\_\_

Where will the dog sleep at night? \_\_\_\_\_

Do you plan to license this dog? \_\_\_\_\_ Will he or she wear an identification collar? \_\_\_\_\_

Are you prepared to provide necessary veterinary care for this dog? \_\_\_\_\_

Do you currently have a veterinarian? \_\_\_\_ Who will be the veterinarian for the dog you wish to adopt? \_\_\_\_\_

What type of food do you intend to feed this dog? \_\_\_\_\_

How often will you exercise this dog? \_\_\_\_\_

What type of exercise will you provide? \_\_\_\_\_

Are you aware that dogs must be leashed when in public? \_\_\_\_\_

Do you intend to keep this dog on a leash whenever he or she is beyond the confines of your property unless you are at a dog park where off-leash dogs are acceptable? \_\_\_\_\_

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What type of control (collar, harness, leash) will you provide? \_\_\_\_\_

Are you prepared to provide appropriate obedience and behavioral training for this dog? \_\_\_\_\_

If you should move, what would happen to the dog? \_\_\_\_\_

If you should predecease this dog, what provisions do you have for its care? \_\_\_\_\_

Are you aware that if the dog does not work out in your home, you may relinquish the dog back to The Fur-Ever Home and that if the dog is returned later than 2 weeks from the adoption date your adoption fees will be considered a donation to Fur-Ever Home? \_\_\_\_\_

Why do you want a dog? \_\_\_\_\_

Why did you choose this particular dog? \_\_\_\_\_

**By signing below, I state that I have read and completed this form, and fully understand the responsibility of adopting this dog.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

++++  
For Fur-Ever Home

\_\_\_\_\_  
Signature of FEH reviewer

\_\_\_\_\_  
Date of review

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