



Dog Adoption Application

NOTE: YOU MUST BE 21 YRS OR OLDER TO APPLY

Date: _____

Animal (s) of Interest: _____

Name: _____ Occupation: _____

Children: Name and Ages: _____

Street Address: _____

City: _____ State _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

Residence Information

How long at present address: _____

Do you rent or own: Rent Own

Type of Residence: House Condo Apt Mobile Home

Landlord Name and Phone Number: _____

(if you are renting)

Is there a pet deposit required? Yes No

Is there a weight limit? Yes No

Do you have a pet door? Yes No

How many hours a day will your pet be alone? _____

Where will your new dog be when you are not home? _____

Where will your new dog sleep at night? _____

When and how often are you planning to exercise your dog?

Other Important Information

Have you owned a dog before? Yes No

Have you owned a puppy before? Yes No

Do you currently have a veterinarian? Yes No

If yes, please provide clinic name and address:

Please provide your PET HISTORY (past and present)

<u>Name</u>	<u>Breed</u>	<u>Gender</u>	<u>Ages owned</u>	<u>Sterilized</u>	<u>Still have</u>
<i>Sample pet</i>	<i>poodle mix</i>	<i>F</i>	<i>10wks-13 yrs</i>	<i>yes</i>	<i>no</i>

In regards to the above history, what happened to the pets you no longer have:

If you currently own a dog, please provide date of last vaccine: _____

Is your dog socialized with other dogs? Yes No

Have you ever bred a dog? Yes No

How do you plan to provide for your dog when you are out of town?

Have all the adults in the household agreed to adopting a dog?

Yes No Don't Know

Is anyone in your household allergic to dogs? Yes No Don't know

Who will be the primary caretaker of the dog? _____

Details of fencing: Height _____

Type (wood, block wall, chain link, etc.) _____

Number of gates: _____

Height of gates: _____

Type of lock: Padlock Key Entry Latch Other, please explain

Areas Available to the Dog

When would the dog be inside: _____

When would the dog be outside: _____

What areas of the house would the dog be allowed? _____

Will the dog have access to: patio garage yard balcony
pool (fence or not fenced, please specify) none of these

What would you do with your pet if you had to move or relocate out of state?

Under what conditions would you NOT keep your pet?

What food will you feed your new dog?

Can you afford regular veterinary care for this dog AND any serious injury or illness costs? Yes No

Do you have experience with obedience training? Yes No

If yes, please detail experience: _____

Are you willing to attend obedience classes at your expense? Yes No

(JARR highly recommends basic obedience training for all rescue dogs)

How would you discipline your dog if he/she misbehaves?

What would you do if inappropriate behavior continued?

Please tell us why you are now interested in adopting:

I AGREE THAT ALL INFORMATION PROVIDED HEREIN ON THIS ADOPTION APPLICATION IS TRUE AND CORRECT.

Signature: _____

Jameson Animal Rescue Ranch RESERVES THE RIGHT TO DENY ADOPTION.

Please return completed application to
Monica Stevens, monica@jamesonrescueranch.org or mail to
JARR, 1224 Adams, Suite C, Street St Helena, CA 94574
Questions: Monica Stevens, 707-815-8153

Jameson Animal Rescue Ranch is a 501(c)3 registered nonprofit organization (#47-1230166)

JamesonAnimalRescueRanch.org | 707.815.8153 | Monica@JamesonRescueRanch.org

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