

# DOG ADOPTION APPLICATION

Preadopt? Y / N Dep: \_\_\_\_\_ Method: \_\_\_\_\_  
Store Forms Completed: \_\_\_\_\_



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

Dog ID: \_\_\_\_\_

Dog Name: \_\_\_\_\_

Thank you for your interest in adopting a rescued pet. The following information is requested so that our adoption counselors can assist you in the selection of a new pet. The animal's welfare is our foremost concern. The consultation process is designed to help us assist you in finding an animal most compatible with your lifestyle and to determine if the adoption is in the animal's best interest.

Your Name: \_\_\_\_\_ Spouse/Partner's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
TX Driver's License #: \_\_\_\_\_ Employer: \_\_\_\_\_

Is your home a:  House,  Apartment,  Mobile Home,  Townhouse / Condo Do you:  Own, or  Rent?

*Before proceeding with this application, please initial each item below. This is required to proceed with an adoption.*

**I understand and affirm that:**

\_\_\_\_\_ I am 18 years of age or older and have identification showing proof of current address.

\_\_\_\_\_ ARF reserves the right to refuse adoption, or placement, to anyone. Adoption approval, or refusal, decisions are made solely at the discretion of ARF. Falsifying information on the application will result in disqualification from adoption.

\_\_\_\_\_ All potential adopters homes may be screened for suitable placement of animals. By submitting this application, you give permission for ARF to investigate and confirm the information that you provide. You agree that this information can be shared with other humane societies, or rescue groups.

\_\_\_\_\_ You give permission for an ARF representative to visit your home prior to adoption to do a home check and after adoption to do follow-up checks on your adopted pet if requested.

\_\_\_\_\_ I, \_\_\_\_\_ (print name), hereby give permission to my landlord, apartment complex, mobile home park, or neighborhood associations to release information to ARF concerning my pet deposit, or other rules regarding pet ownership.

**My Landlord/Apt. Complex's Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

\_\_\_\_\_ I, \_\_\_\_\_ (print name), hereby give permission for any veterinarian providing service to me to release medical information on any/all of my animals, past and present, to ARF.

**My current veterinarian is:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

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

**I understand and affirm the above information, and agree to the requirements ARF has in the adoption process.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# ANIMAL RESCUE FOUNDATION of Texas, INC.

## DOG ADOPTION APPLICATION

**Before completing this application, please read the adoption contract you must agree to and will later sign.**

*Please complete both pages and the attached contract. Then, give it to an ARF adoption counselor or fax all pages to: 972.318.9647*

### Adopter Information

How long at current address? \_\_\_ Yrs \_\_\_ Mos. Do you plan to move in the next 12 months?  Yes  No

**Renter Info:** Does your landlord require a pet deposit?  Yes,  No How much? \$\_\_\_\_\_

Does your landlord set a weight limit for pets?  Yes,  No Weight limit? \_\_\_\_\_ lbs.

Do you currently have a pet deposit held by your landlord?  Yes,  No

Is the pet deposit per household, or per animal? \_\_\_\_\_

Total number of individuals in household: \_\_\_\_\_ Ages of children in your household: \_\_\_\_\_

Do all of the adults in your household consent to the adoption of this dog?  Yes,  No

Does anyone in your household have known allergies to Dogs?  Yes,  No

Why do you want to adopt a dog? Check all that apply:  House pet  Outdoor pet  Guard dog  
 Watch dog  Gift  Companion for a Child or Pet

Do you have preferences as to breed, sex, etc?  Yes,  No Please Specify: \_\_\_\_\_

How many hours per day will this dog be (define in hours): Inside? \_\_\_\_\_ Outside: \_\_\_\_\_ Crated? \_\_\_\_\_

Do you have a fenced yard?  Yes,  No Type of fence: \_\_\_\_\_ (Wood, Chain Link, Other) Height? \_\_\_\_\_ ft.

Do you have a Pool?  Yes,  No

How many hours will this pet be home alone during the day? \_\_\_\_\_

Where will this pet be kept while you are away from home? \_\_\_\_\_

If you had to move, what would you do with this dog? \_\_\_\_\_

How will you keep your dog confined?  Leash /  in house /  fenced yard /  dog run /  chain /  crate  
 other (specify): \_\_\_\_\_

How will you transport this dog? \_\_\_\_\_

If you have cats, have they been exposed to dogs before?  Yes,  No

Is this your 1<sup>st</sup> experience with a dog?  Yes,  No Do you, or your spouse, travel frequently?  Yes,  No

Have you considered the costs involved in adopting a pet (food, vet care, housing, damage to your property)?  Yes,  No

Do you realize you will likely have to housetrain this dog?  Yes,  No

Have you housetrained dogs before?  Yes,  No If yes, what housetraining method was used? \_\_\_\_\_

How much time will you allow for this animal to become housetrained? \_\_\_\_\_

Do you plan to take your dog to obedience training?  Yes  No  Maybe. If yes, will you attend, too?  Yes  No

Are you familiar with heartworm disease?  Yes,  No

If you have, or had, dogs, are/were they on heartworm preventative?  Yes,  No What kind? \_\_\_\_\_

# ANIMAL RESCUE FOUNDATION of Texas, INC. DOG ADOPTION APPLICATION

No dog is perfect! Please check all behaviors you are unwilling, or unable, to work through:

- |                                                   |                                                 |                                                               |
|---------------------------------------------------|-------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Eliminating in the house | <input type="checkbox"/> Digging                | <input type="checkbox"/> Pulling on leash when trying to walk |
| <input type="checkbox"/> Escaping                 | <input type="checkbox"/> Barking                | <input type="checkbox"/> Destructive behavior or chewing      |
| <input type="checkbox"/> Aggression towards cats  | <input type="checkbox"/> Aggression toward dogs | <input type="checkbox"/> Aggression toward children           |
| <input type="checkbox"/> Mouthiness / Nipping     | <input type="checkbox"/> Jumping on people      | <input type="checkbox"/> Scratching on doors                  |
| <input type="checkbox"/> Separation anxiety       | <input type="checkbox"/> Food Aggression        | <input type="checkbox"/> None of these                        |
| <input type="checkbox"/> Getting on furniture     |                                                 |                                                               |

Other: \_\_\_\_\_

Have you ever surrendered an animal to a rescue program, shelter, or animal control?  Yes  No

If you currently have dogs, have they been exposed to other dogs before?  Yes  No

### Pet ownership history:

Total number of pets you currently own: # of dogs: \_\_\_\_\_ # of cats: \_\_\_\_\_ Other: \_\_\_\_\_ (species: \_\_\_\_\_)

Are all pets in your household current on their vaccinations?  Yes  No

Are any dogs in your household diagnosed with diseases, such as:

Heartworm disease?  Yes,  No Canine distemper?  Yes,  No Parvo Virus?  Yes,  No

Please list all pets currently owned

NAME	Type	Breed	Sex	Spayed/Neutered	Inside/Outside/Both	Age	Declawed

List all pets owned within the past 2 years, NOT currently owned. (Include deceased, lost, stolen, sold, or given away):

Name	Type	Breed	Sex	Spayed/Neutered	Age	Declawed	Reason

By submitting this application, I confirm that all information in this application is correct and complete and I acknowledge that I have read, understand and agree to all the terms and conditions of the adoption contract (pages 4 & 5). I authorize my landlord, veterinarian and any other parties contacted to release information confirming this application to ARF for verification. Failure to provide accurate information will forfeit my adoption fee and revert ownership of this animal to ARF. Your signature will be required at the time you meet with an ARF representative.

Potential adopters are screened for suitability. ARF reserves the right to refuse placement of an animal for any reason. Animals may be removed from unsuitable homes at any time base upon the discretion of the CHS Board of Directors.

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

**ANIMAL RESCUE FOUNDATION of Texas, INC.  
DOG ADOPTION CONTRACT AND DISCLAIMER OF LIABILITY**

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_  
ARF Dog ID: \_\_\_\_\_ Dog Name: \_\_\_\_\_

**Please complete the above, then print out these pages and bring with you** when you meet with a ARF adoption counselor. **Read and initial** each section. This is **a legally binding contract**. Please consult with your adoption counselor if you do not understand any portion of this contract.

	I agree to provide the pet daily food and fresh water, shelter from extreme temperature and weather conditions, and veterinary care to prevent and treat disease, illness, and injury. I also agree to keep the dog free of parasites (such as fleas, ticks, worms, etc.). I will ensure that it is treated in a humane manner at all times.
	I attest that I am not obtaining this animal for use in any kind of experimentation, or for the sale to any agency that experiment on animals.
	The Animal Rescue Foundation of Texas does not necessarily know the nature of the animal, or its characteristics, and gives no warranties, expressed and/or implied, of temperament or fitness. I confirm that I have been provided information on the pet's current health status, noting any known pre-existing conditions. I understand that the pet is delivered "as is." I understand that the pet should be isolated for a period of time from my own pets, to the extent possible, in the event that it has been exposed to any type of illness.
	<b>If I should decide, for whatever reasons, that I cannot continue to care for this dog, I will notify ARF immediately. I WILL NOT turn it over to an animal shelter, or have it destroyed. I understand that ARF, at its discretion, will place the animal with another caregiver as soon as possible after receiving any notification.</b>
	I understand that ARF has transferred ownership of this dog to me based on the information provided in my Adoption Application. The dog is not to be given, or sold, to another individual, institution, or organization, without the express written permission Animal Rescue Foundation of Texas. The dog is not to be placed in any environment that is functionally different than the one described in my Adoption Application.
	I relieve Animal Rescue Foundation of Texas of all liability and responsibility for damage, or injury, to persons, property, or other animals, caused directly, or indirectly, by the dog.
	I agree to keep a collar and an identification tag on the dog at all times.
	I understand that this animal has social and emotional needs, as well as physical ones. I am prepared and able to devote time and attention to the dog to meet those needs.
	I agree to notify Animal Rescue Foundation of Texas if the pet is lost or dies within 1 year.
	I grant permission to Animal Rescue Foundation of Texas to verify information provided in my Adoption Application, including, but not limited to, payment of required pet deposits and verification of veterinary care.
	I understand that it is the responsibility of the new pet owner to see that the animal complies with all health regulations and other applicable ordinances. This includes, but is not limited to, vaccinations to prevent rabies and local pet licensing laws.
	I understand that there is a monetary cost associated with pet ownership. In addition to routine vaccinations and screening tests, dogs may need veterinary care for treatment of illness and/or injury. Other costs may include charges for pet deposits required by landlords and damage to personal property. I attest that I am both financially able and willing to accept full responsibility for the dog.
	I confirm that I am making a long-term commitment to the ownership of this dog. Animal Rescue Foundation of Texas has informed me of the animal's estimated current age, and I understand the life expectancy of the dog may exceed 20 years. I also understand that changes in my life-style or family composition do not relieve me of my responsibility to the dog.

**ANIMAL RESCUE FOUNDATION of TEXAS, INC.**  
**DOG ADOPTION CONTRACT AND DISCLAIMER OF LIABILITY (continued)**

	I understand that Animal Rescue Foundation of Texas cannot predict the behavior of this dog in its new home. Failure of the dog to meet my expectations does not relieve me of my responsibility to the animal. I understand that consistent, humane training can help the dog adapt to its new home and alter certain behaviors.
	I understand that children are not fully capable of caring for an animal and that the primary responsibility of the dog rests on me, the adult adopter. I will provide appropriate supervision and instruction on proper handling of pets to children in my household.
	I agree to present the dog and the dog's Health Record provided me in the Adoption Literature to a full-service veterinarian for examination within thirty (30) days.
	I understand that ARF discourages transporting animals in open vehicles, unless the animal is confined in a crate AND that transporting uncrated animals in an open pickup bed is unlawful in Texas.
	I understand that ARF strongly recommends crate and obedience training for all dogs.
	I confirm that I am adopting the dog as a personal companion, that it will reside at my primary residence, and that I am not acquiring this dog solely for use as a guard animal, or for rodent control.
	<b>I understand that failure to comply with any of the conditions in this agreement constitutes just cause for Animal Rescue Foundation of Texas to revoke the adoption arrangement, and to remove said animal from my ownership and care, at which time full ownership of the pet will revert back to Animal Rescue Foundation of Texas.</b>
	Other special conditions of adoption: _____

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

ARF Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR ARF USE ONLY**

ARF Number: \_\_\_\_\_ Dog Name: \_\_\_\_\_ Dog DOB: \_\_\_\_\_

Sex:  Male  Female Color: \_\_\_\_\_ Breed/Description: \_\_\_\_\_

Adoption Location: FMPS EWPS HVPC HOME Other: \_\_\_\_\_

\*\*\*\*\*

VSA given? For: Exam DHLPPC, Deworm, Bordetella, Rabies, HW Test, INF, Spay/Neuter Exp: \_\_\_\_\_

Other: \_\_\_\_\_

Pet Owner Manual provided?  Adoption Policy explained?  Pet History completed?  Application & Contract signed?

***Payment Information***

Check # \_\_\_\_\_  Paypal  Cash  Credit

Adoption Fee: \$ \_\_\_\_\_ Donation: \$ \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_

Application reviewed/approved by: \_\_\_\_\_ ARF Adoption Counselor: \_\_\_\_\_

Notes: \_\_\_\_\_