

DATE: _____



I am interested in:
____ Adoption ____ Fostering

Which dog(s) are you interested in? _____
Please note: any false statements on this application will disqualify you from adopting from Dogs Forever.

PERSONAL INFORMATION

Name(s) of Interested Party: _____
Date of Birth(s) of Interested Party: _____
Address: _____ City, State Zip: _____
Phone: _____ Phone Type: Cell Home Work
Email: _____
Employer: _____ Occupation: _____

HOME INFORMATION

Type of Home: House Condo Apartment Mobile Home Other
Do you own or rent? Own Rent*
*If rent, please provide landlord contact information: _____
Do you have a fenced-in yard? If yes, please describe: _____
What type of neighborhood do you live in? City Town Rural/Country
Will someone be home during the day? Yes No
Does anyone come home for lunch? Yes No
Is anyone in your family allergic to animals? Yes No
Please list the name, age, and relationship to all other individuals in your home:

FOR FOSTER ONLY

Have you fostered an animal before? Yes No
If necessary, are you willing to take your dog to an approved vet? Yes No
Are you willing to have someone from Dogs Forever visit your home prior to fostering and anytime during the foster process? Yes No
Are you willing to care for a special needs or senior dog? Yes No
Will you be able to provide your dog with quality food (i.e. not generic)? Yes No

DATE: _____

DOG INFORMATION

Describe what you are looking for in a dog: _____

How do you plan to exercise your dog? _____

How many hours will your dog be alone during a 24 hour period? _____

Who will be the primary caregiver for the dog? _____

Do you currently have dogs in your home? Yes* No

*If yes, please list the name, gender, age, and breed for each dog:

What brand of food do you currently feed your dog(s)? _____

Where do your dog(s) stay? Indoors Outdoor Kennel/Yard Chained Outdoors Combination

OTHER

Do you have any cats in your home? Yes* No

*If yes, are they declawed? Yes No

*If yes, where do they stay? Indoors Outdoors Combination

Please list any additional pets in your home: _____

Are all of the pets in your home spayed/neutered? Yes No

If applicable, list the name and phone number of your veterinarian: _____

Please list any pets you have had in the past ten years not already listed: _____

Have you ever given up a pet before? Yes* No

*If yes, please explain: _____

REFERENCES (NON-FAMILY MEMBERS)

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

CONSENT/RELEASE

I certify that all information provided on this application is true and complete to the best of my knowledge. I understand that Dogs Forever is not obligated to accept me as an adopter/foster. I hereby do waive, release, and forever discharge Dogs Forever, its volunteers, agents, and all others from any and all responsibilities or liabilities from injuries or damages resulting from my role as an adopter/foster.

Signature: _____ Date: _____

Date Received: _____ Date Contacted: _____ DF Rep Signature: _____