



Welcome! In order for us to help place a pet with you that is best suited for you and your lifestyle, please take a moment to fill out this adoption application.

Date

Your Name

Your Address

City, St, Zip

Home phone

Cell phone

How many adults in the home ?

How many children in the home (and please list their ages):

How many pets do you currently own ?

Dog and/or Cat and/or Other ?? and please note if spayed or neutered.

Please note your pets: breed, gender, age, and disposition with other animals

If you do not currently have a pet, please provide information about pets you have had in the past 2- 5 years

How did you obtain these pets ?

All of our adoptables are spayed/neutered, hw tested, current on all of their required vaccines; the same responsible care is required from our applicants.

Please list the name and phone # of **your veterinarian:**

Vet Name

Vet's Address

Vet's Phone #

Name of **DOG** you would like to adopt

I would like a dog that is..... Please check all areas that apply:

- Puppy - 2 yrs Middle age (3 - 5 yrs) Adult (6 and older)
 Very Active Somewhat Active Pretty mellow
 Good with cats Good with dogs Good with kids Doesn't matter

How do you plan to exercise a new dog? (Walk on leash, play in yard, kennel/run, or other)

How many hours a day will your new pet spend alone ?

Do you intend to keep your pet inside ?

If not, where

Where will your new pet stay when you are not home ?

Have you ever used a training crate with a puppy or a dog?

Have you ever taken a puppy or dog to training classes?

What circumstance or problem would cause you to "give up or return" your new pet ?

A home visit is required before adoptions are approved, are you willing to have a home visit ?

- Yes No

Do you own or rent your home ?

How long have you lived at this residence ?

Landlord's name

Landlord's phone

Do you have a fenced yard? If yes, what kind ??

This is page 2 of 3.... .

ONE more page of information is required. THANK YOU !!

Please provide 2 references (not relatives) who have personal knowledge of your experience with animals.

Personal Reference # 1

Name

Address

City, State, Zip

Phone#

How does this person know you ?

Personal Reference # 2

Name

Address

City, State, Zip

Phone#

How does this person know you ?

I certify the information I have given is true, and I realize that any misrepresentation of facts may result in my losing the privilege of adoption a pet. I understand you have the right to deny my request to adopt an animal for any situation or not in the best interest of the animal. I authorize investigation of all statements in this application, and also authorize my vet to release any information requested by you .

Your signature

Please **return** form to:
D.R.E.A.M. P.O.Box 322 Tipp City, OH 45371
or
Email: PetsRRpassion@gmail.com