



817-726-8380

drowzydawg@gmail.com

drowzydawgrescue.org

# Dog Adoption Application

Welcome to Drowzydawg Rescue adoption program. We request the following information so that we can assist you in the selection of a new dog. This form and a consultation with a Drowzydawg Rescue representative are designed to help you find the dog that is most compatible with your lifestyle. Please return this form to Drowzydawg Rescue at:

P.O. Box 412,  
Covington, TX 76636

To be considered as an adopter, you must:

- 🐾 Be 21 years of age or older
- 🐾 Have identification showing your present address
- 🐾 Provide a copy of your driver's license or state ID
- 🐾 Have the knowledge and written consent of your landlord
- 🐾 Be able and willing to spend the time and money necessary to provide medical treatment and proper care of the dog.

*Completion of this application does not guarantee adoption of a Drowzydawg Rescue dog.*

**Please print legibly and complete all pages. Thank you!**

Name of applicant \_\_\_\_\_ Date \_\_\_\_\_

Street address \_\_\_\_\_

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

Main Contact Number \_\_\_\_\_ Alternate Number \_\_\_\_\_

Email Address \_\_\_\_\_ Age \_\_\_\_\_

How long have you lived at the above address? \_\_\_\_\_

Are you adopting for yourself or for someone else? \_\_\_\_\_

Describe in detail the dog you are looking for or the name of the Drowzydawg Rescue animal(s) you are interested in \_\_\_\_\_

Will this be your first dog?  Yes  No

What kind of pets have you had in the past? \_\_\_\_\_

Which of these do you still have? (include age, sex, and breed) \_\_\_\_\_

Have they been spayed or neutered?  Yes  No  Don't know

Are they current on vaccinations?  Yes  No  Don't know

What happened to the pets you no longer have? \_\_\_\_\_

Have you ever turned one of your animals into a shelter?  Yes  No

If yes please explain: \_\_\_\_\_

Have you ever had a pet euthanised?  Yes  No

If yes please explain: \_\_\_\_\_

If you have pets, will they adjust to a new dog in the house?  Yes  No  Don't know

Was your last dog obedience-trained?  Yes  No  Doesn't apply

Why do you want this dog? (check all that apply)  Companion  Companion for other pet  House pet  
 Watch dog  Guard dog  Hunting  Personal protection  Other (explain)

How many adults are in your family? \_\_\_\_\_ How many children? \_\_\_\_\_ Children's ages? \_\_\_\_\_

Does any member of your household have an allergy to dogs?  Yes  No

Is someone home during the day?  Yes  No If yes, who? \_\_\_\_\_

How many hours each day will the dog be without human companionship? \_\_\_\_\_

Please explain \_\_\_\_\_

Where do you live?  House  Apartment  Condo  Mobile home  Other \_\_\_\_\_

Do you own or rent your home?  Own  Rent

If you rent, may we contact the landlord to obtain permission for this dog to live in your home?  Yes  No

Landlord's name and phone number: \_\_\_\_\_

Do you have a completely fenced yard?  Yes  No Is there a gate?  Yes  No

What kind of fence? \_\_\_\_\_ Height of fence? \_\_\_\_\_

If no fenced yard, please explain: \_\_\_\_\_

Do you have a dog door?  Yes  No Will there be times when the dog will be tied up?  Yes  No

If yes, when: \_\_\_\_\_

Will the dog spend any time in the garage?  Yes  No

If yes please explain: \_\_\_\_\_

Do you have a pool?  Yes  No If yes, is there a fence around the pool?  Yes  No

What kind of fence? \_\_\_\_\_ Height of fence? \_\_\_\_\_

If your new dog/puppy is not housebroken, what method will you use to train him/her? \_\_\_\_\_

Will you keep the dog up to date on vaccinations?  Yes  No If no, explain: \_\_\_\_\_

Who is your veterinarian? \_\_\_\_\_

Phone: \_\_\_\_\_ City/State: \_\_\_\_\_

Are you able and willing to exercise the dog on a regular basis?  Yes  No

If yes, method of exercise: \_\_\_\_\_

Where will the dog be kept during the day? \_\_\_\_\_

Where will the dog be kept at night? \_\_\_\_\_

If you drive a pickup truck, would you allow the dog to ride in the truck bed?  Yes  No

If yes, explain: \_\_\_\_\_

If you go away for a few days, or on a vacation, who will take care of the dog?

What arrangements will you make for the care of your pets in case of an emergency?

If you move, will you take the dog with you?  Yes  No

If no, explain: \_\_\_\_\_

Have you ever applied to Drowzydawg Rescue before to adopt an animal?  Yes  No

If yes, when: \_\_\_\_\_

Have you ever brought animals to Drowzydawg Rescue  Yes  No

If yes, explain: \_\_\_\_\_

Are you willing to have a representative of Drowzydawg Rescue come to see where the dog will be living?  Yes  No

If no, explain: \_\_\_\_\_

Are you willing to take responsibility for this dog for the next 10 to 15 years?  Yes  No

If no, explain: \_\_\_\_\_

What provisions will you make for the dog should you become unable to care for him/her?

**Please provide two personal references:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Release for Veterinary reference:** I, \_\_\_\_\_ (print name) hereby give permission for any veterinarian providing service to me to release medical information on any/all of my animals to Drowzydawg Rescue.

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

**I have read and understand the entire application, and by signing I understand Drowzydawg Rescue has the right to deny any application for any reason, and reasons for denial may not be given. Drowzydawg Rescue receives applications from multiple areas including email, on-site, and off-site. I am aware that there may be multiple applications on the animal in which I am interested. I certify that the above information is correct. I understand that false information may result in nullifying the adoption.**

**By signing this application I am certifying that I intend to be the legal owner and person responsible for the care and well being of this animal. I give representatives at Drowzydawg Rescue permission to contact my veterinarian, references, and landlord in order to process this application.**

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

Notes (for Drowzydawg Rescue use):

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