

Poodle and Pooch Rescue

www.poodleandpoochrescue.org 321-277-3089

ADOPTION or FOSTER APPLICATION

- Filling out an application does not guarantee adoption, nor does it obligate you to adopt.
- All applicants are thoroughly screened, including home visits and interviews.
- A donation of \$100.00 to \$350.00 (based on age) is required at the time of adoption.

First Name _____ Last Name _____ Age _____

Spouse/Partner Name _____ Age _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ E-mail _____

Work Phone _____ Cell Phone _____

Occupation _____ How many hours do you work outside the home? _____

Housing Information:

Single Family House Apartment Mobile Home Townhouse/Condo Other

Own Home? Rent Home?

If you rent, do you have your landlord's permission to own a dog? Yes No

Landlord Name _____ Phone Number _____

Do you have a completely fenced yard? Yes No

Household Information

Age and gender of children in living in household _____

Age and gender of children visiting _____

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

Animals In Your Home:

Do you own any other dogs? Yes No

If yes, are they Spayed/Neutered? Yes No

What type of monthly preventions do you use: _____

Please list by name, breed, size, gender of each dog owned: _____

Do you own cats? _____

What happened to your previous pets? If they died, advise the cause and age at time of death.

Pet Information:

How often would you have your dog groomed? _____

Where will your dog live? Indoors Outside

Where will the dog sleep? _____

Veterinarian / Groomer Information:

Please provide your vet's name and phone number: _____

Please provide your groomer's name and phone number: _____

Adoption Preferences:

Please keep in mind the more preferences you have, the harder it will be to find a match for you.

What size poodle or mixed breed would you prefer? Weight _____

Would you consider a mixed breed? Yes No

What are your color, gender or age preferences? _____

Would you consider adopting a dog who has been abused or has special needs? _____

References:

Please provide 1 personal reference with their phone numbers.

Additional comments you wish to provide:

SIGNATURE

PRINTED NAME

DATE

Send via this website or print and mail to:

**Poodle & Pooch Rescue
P.O. Box 781951 Orlando FL 32878**

FOR INTERNAL USE ONLY

Reviewed By: _____ **Date:** _____

Vet / Groomer References Checked By: _____ **Date:** _____

Personal References Checked By: _____ **Date:** _____

Comments: _____