

Mutt Madd-ness Dog Adoption Form

Welcome to the Mutt Madd-ness Adoption Program. The following information is requested so that we can assist you in the selection of a new dog. This form and a consultation with a Mutt Madd-ness representative are designed to help you find the dog most compatible with your lifestyle.

In order to be considered as an adopter you must:

- Be 21 years of age or older.
- Have identification showing your present address.
- Have the knowledge and consent of your landlord.
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet.

Completion of this application does not guarantee adoption of a Mutt Madd-ness dog.

Thank you!

Date: _____

* Denotes required fields

Name: * _____

Address: * _____

City, State and Zip*: _____

Phone: * W Home _____ Cell Phone: _____

Email: _____

Age: * _____ Driver's License Number*: _____

Dog you are interested in: _____ Is this your first dog? Y N

How many cats and/or dogs have you owned in the past five years*? _____

Please Note: Breed / Age / Spayed-Neutered / How Long Owned

Have they been spayed/neutered? * Y N | Are they current on vaccinations? * Y N

What happened to the ones you no longer have? * _____

Have you ever turned your dog in to a shelter? * Y N

If yes, please explain: _____

Have you had a pet euthanized?* Y N

If yes, please explain: _____

If you have other pets will they (or it) adjust to a new pet entering the household? *

Was your last dog obedience trained? * Y N

Why do you want this dog? * _____

How many adults are there in your family? * _____ How many children? * _____

Children's ages:* _____; _____; _____; _____

Does any member of your household have an allergy to dogs? * Y N

Is someone home during the day? * Y N

How many hours each day will the dog be without human companionship? * _____

Explain: _____

Which do you live in?* Condo Home Apartment Other

If other, explain: _____

Do you own or rent your home? *

If you rent, may we contact the owner to obtain permission for this animal to live in your

home?* Y N - Owner's name and phone number: _____

Do you have a completely fenced yard?* Y N

What kind of fence? Height ? _____

Would you be able and willing to exercise the dog on a regular basis? * Y N

Method: _____

Are there times when the dog will be tied up? * Y N

Will the dog spend any time in the garage? * Y N

If your new dog/puppy is not housebroken, what method will you use to train it? *

Will you keep the dog up-to-date on vaccinations/heartworm preventative? * Y N

Who is your veterinarian? * _____ Phone: * _____

Where will this dog be kept during the day? * _____

During the night? * _____

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

If you move, will you take the dog with you? * Y N

Have you ever applied to adopt an animal from Mutt Madd-ness in the past? Y N

If so, when? * _____

Did anyone refer you to Mutt Madd-ness? * Y N

If yes, please explain: _____

Are you willing to allow a Mutt Madd-ness representative come to see where the dog will be living?* Y N

Are you willing to take the responsibility for this dog for the next ten to fifteen years? *

Y N

For which of the following reasons would you give up your dog? Moving; New Baby;

Not getting along with children; Not getting along with other pets; Divorce;

Getting out of fence; Behavior issues; Financial; Aggressive; Got too big;

Shedding; Too time consuming; Allergies; Barking; Medical problems

None of the above

Thank you for completing your application with Mutt Madd-ness.

By signing below, I am attesting to the truthfulness of my answers. Falsification or misrepresentation of the above information will result in rejection of this application or possible removal of adopted pet from my home.

Signature

Date

Mutt Madd-ness reserves the right to refuse any applicant.