

	FULL NAME OF APPLICANT		DATE	
EMAIL		PHON	IE	
ADDRESS				
AGE OF APPLICANT	OCCUPATION OF APPLICAN	NT		
ADDITIONAL HOUSEHO	LD MEMBERS (NAME/AGE/RELAT:	ION)		
DOES ANYONE IN THE H	HOUSEHOLD SUFFER FROM DOG ALI	_ERGIES?	DO YOURENT OR OWN?	
IS YOUR HOME A HOUSE	E, APARTMENT, CONDO, TOWNHOU	JSE, TRAILER?	DO YOUHAVE A POOL?	
DO YOU HAVE A POND?	DO YOU HAVE A FEN	ICED YARD?	DO YOU HAVE CENTRAL AIR?	
IS SOMEONE HOME DUR	ING THE DAY? WHERE	WILL THE DOG SLE	EP?	
			-DAY BREAK FOR THE DOG?	
WHY ARE YOU INTERES	TED IN ADOPTING THIS DOG?			
ARE YOU PREPARED TO I	 PAY AN ADOPTION FEE (\$50-\$10	00)?		
DO YOU HAVE A FINAN	CIAL PLAN SET IN PLACE FOR EME	ERGENCY VET VISI	TS?	
VET REFERENCE'S NAME	 E AND PHONE NUMBER			
HAVE YOU EVER HAD TO	RE-HOME A DOG? IF YES, EXPLAI	N		
WHY DO YOU FEEL LIKE	YOU MAY BE THE BEST FIT FOR TH	HIS DOG?		