**Quad Cities Canine Adoption Application**

This standard adoption application must be completed and signed by anyone wishing to adopt a dog from Quad Cities Canine. Our number one concern is for the dogs and we strive to place them in good, loving homes.

**NOTE: Application for adoption DOES NOT guarantee acceptance for adoption.**

**NOTE: All CURRENT pets in a household MUST be spayed/neutered and up-to-date on vaccines before any adoption will be considered for approval.**

**NOTE: Quad Cities Canine reserves the right to accept or deny any application or potential adopter.**

**\*Required**

\*Which dog are you interested in adopting?

\*Your name (Adopter)

Co-Adopter's Name, if applicable

\*Street Address (physical address)

\*City \*State \*Zip Code

\*Mailing address (PO Boxes) or indicate “same”

\*City \*State \*Zip Code

\*Best Phone Number to reach you

Alternate Phone Number

\*E-mail address

\*Best Day(s) Time(s) of Day to Call You

\*Veterinarian's Name \*Phone

\*Veterinarian's City & State

\*Provide three references that are not part of your immediate family:

1. (Name) (Phone)

 (Relationship) (years known)

2. (Name) (Phone)

 (Relationship) (years known)

3. (Name) (Phone)

 (Relationship) (years known)

\*How long have you lived at your current residence?

\*Your home is:

[ ]  Owned by you and/or your spouse/life partner

[ ]  Owned by someone else within the house

[ ]  Rented directly from the owner

[ ]  Rented directly through a management company

[ ]  Rented as a part of a group of roommates

If renting, is your name on the lease? [ ]  Yes [ ]  No

[ ]  Other:

\*If renting, do you have your landlord’s permission to have a dog? [ ]  Yes [ ]  No

\*If you are not the property owner, we will need to verify your landlord’s current pet policy.

Landlord’s Name: Phone #:

\*How many adults live in your home?

\*How many children? \*Ages?

\*Does anyone in your household have allergies to dogs that you are aware of? [ ]  Yes [ ]  No

\*Who will primarily be responsible for the care of this dog?

\*How many hours will the dog be alone each day?

\*Where will the dog be kept when no one is home (indoors, yard, indoor/outdoor, garage,

enclosed patio, etc)?

If inside only, specify: run of the house, crate, specific room(s) – describe

What rooms are off limits?

If outside only, specify: yard, garage, enclosed patio, other – describe

\*When will the dog be inside?

\*When will the dog be outside?

\*Where will the dog be kept at night?

\*Do you have a doggie door?

\*Do you have a fenced yard? [ ]  Yes [ ]  No Type of fence?

 Fence height? Highest point? Lowest point?

Have you recently inspected your fence(s)? [ ]  Yes [ ]  No

Is it / are they in good condition with no holes or loose points? [ ]  Yes [ ]  No

(Describe)

\*Is your yard shared with neighbors? [ ]  Yes [ ]  No

\*Who has access to your house and/or yard (housekeeper, neighbor, pool maintenance

personnel, gardener, etc?

\*Do you trust your workers not to let the dog get out? [ ]  Yes [ ]  No

\*List all of the pets you have had in the last 7 years including current pets and those you no longer own (include species, breed, age, sex, spayed/neutered – if not, why?, length of ownership and what happened to her for each pet):

\*If you have other pets, are their vaccinations current? [ ]  Yes [ ]  No

\*Are they currently licensed? [ ]  Yes [ ]  No

\*Describe your dog owning experience

[ ]  I have had dogs of my own as an adult

[ ]  I grew up with dogs or have worked with them but have not had my own as an adult

[ ]  I have never had a dog or have limited experience with them

[ ]  Other (describe):

\*Have you had experience with behavioral or medical issues with your previous or current pets? [ ]  Yes [ ]  No

(If yes, describe)

\*How would you discipline your dog if he/she misbehaved / chewed household items?

\*What method do you intend to use for housetraining your dog (rub nose in offending spot, take out every couple of hours, crate train, consult professional, etc)?

\*When might you allow your dog off-leash (public park, dog park, lake/river, hike, neighborhood walk, etc)?

\*What would you do if your dog got out?

\*Pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, shelter and exercise for your new dog? [ ]  Yes [ ]  No

\*What is your monthly budget for your dog?

\*Are you willing and able to make a long-term commitment to care for your dog for its entire life span, which could be as long as 15 years or more? [ ]  Yes [ ]  No

\*Under what circumstances would you **NOT** keep this dog (excessive barking/neighbor complaints, aggressive on leash, destructive chewing, biting/aggression, digging, divorce/separation, allergies, shedding/dirty, not trainable, poor watchdog, moving/relocating, house-training problems, financial problems, growling/nipping at children and/or guests, excessive vet bills/chronic illness, having a baby, new spouse/partner doesn’t like dogs, pets aren’t getting along, etc)?

\*Additional comments about why you would like to adopt this particular dog?

\*Which of the following best describes your reasons for wanting this dog?

[ ]  Companion

[ ]  Search & rescue

[ ]  Guard dog

[ ]  Agility

[ ]  Hunting

[ ]  Jogging

[ ]  Obedience training

[ ]  Walking buddy

[ ]  Couch warmer

\*Describe the temperament and activity level you are looking for in a dog:

[ ]  High energy

[ ]  Outdoorsy dog

[ ]  Lap dog

[ ]  Mellow

[ ]  Affectionate

[ ]  Quiet

[ ]  Guard dog

\*The noise/activity in my home is usually:

[ ]  High

[ ]  Medium

[ ]  Low

\*When it comes to relating to dogs, I tend to be more

[ ]  Strict, demanding (dog must learn and follow all commands)

[ ]  Moderate (encouraging of good behavior)

[ ]  Lenient, wishy-washy, easily coerced by the dog

\*I would enjoy brushing or grooming my dog:

[ ]  Rarely

[ ]  Occasionally

[ ]  Daily

[ ]  Weekly

[ ]  Monthly

\*I would prefer a dog that:

[ ]  Would enjoy walking with me on leash

[ ]  Will exercise him/herself in our yard

[ ]  Would enjoy going to the dog park

[ ]  Would run, jog or hike with me

[ ]  Requires only enough exercise to do his/her business

\*My ideal dog would:

\*Bad dog habits that I cannot tolerate are:

\*Is there anything else you would like to share with us?

\*Do you have any questions?

**I understand that by voluntarily completing and emailing this agreement, I am entering into a legal and binding contract with Quad Cities Canine.  Breach of any term(s) of this agreement is deemed actionable.**

**\*I acknowledge that I have read and understand the above contractual notice.**

[ ]  **Yes** [ ]  **No**

Date Signature of Adopter

If submitting application electronically,

 Adopter’s Full Name

Thank You!

We truly appreciate your application and we'll be in contact.

**For Office Only:**

 Home Visit Completed

 References Checked

 Vet Records of Current Dog Received

 Copy of Photo ID

 Adoption Fee Accepted

Type and amount: