



Application to Adopt

info@gingerspetrescue.org // ginger@gingerspetrescue.org
www.gingerspetrescue.org

Please include photos of the inside and outside of your home with this application.

Dog(s) I am interested in adopting:			
PART I PERSONAL INFORMATION			
Name:		Home Phone:	
Address:		Cell Phone:	
City, State, Zip Code:			
Email Address:			
Employer Name:		Spouse's Employer:	
How did you hear about Ginger's Pet Rescue?			
Would you like to receive emails from us about events and more? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Can you afford the adoption fee and vet care? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Number of adults in household:		Number of children in household:	
Men:	Women:	Boys:	Girls:
Ages:	Ages:	Ages:	Ages:
If you are a Senior over 65 what is your plan for your dog if something should ever happen to you?			
Are you expecting a child or planning a family in the near future? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are all your family members in favor of adopting a rescue dog? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is anyone in your household allergic to animals? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Type of dwelling you live in: <input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Condo/Townhouse <input type="checkbox"/> Other – please explain:			
Do you own or rent? <input type="checkbox"/> Own <input type="checkbox"/> Rent		If you rent, does your building allow dogs? Yes <input type="checkbox"/> No <input type="checkbox"/> Restrictions?	
Please provide the name and phone number of your current landlord:			
How long have you lived at your current address?		Are you planning on moving in the near future? Yes <input type="checkbox"/> No <input type="checkbox"/>	
How many consecutive hours a day are you away from home for work, school, etc.?			

What is your plan for the dog while you are gone during the day?				
Being gone to work for 8 hours, you must have a plan in order to adopt a dog from us. Having another dog is acceptable as long as your dog will not be all alone. No dog is happy being all alone as they will bark, dig, chew and need to go to the bathroom. What is your plan?				
Are you willing to allow us to visit your home prior to adopting? Yes <input type="checkbox"/> No <input type="checkbox"/>			Would you consider a special needs rescue dog? Yes <input type="checkbox"/> No <input type="checkbox"/>	
PART II TYPE OF DOG				
Sex preference: <input type="checkbox"/> Male <input type="checkbox"/> Female		Age preference? <input type="checkbox"/> Puppy <input type="checkbox"/> Young <input type="checkbox"/> Adult <input type="checkbox"/> Senior <input type="checkbox"/> Any		
How many dogs have you owned before?				
Primary reason(s) for wanting to adopt a dog? <input type="checkbox"/> Companionship <input type="checkbox"/> Guard dog <input type="checkbox"/> Company for my current pet(s) <input type="checkbox"/> Save a dog in need <input type="checkbox"/> Emotional support animal <input type="checkbox"/> A gift for friend/family <input type="checkbox"/> Jogging/hiking buddy <input type="checkbox"/> Other – explain:				
PART III ENVIRONMENTAL INFORMATION				
Do you have a yard? Yes <input type="checkbox"/> No <input type="checkbox"/>		Is it fully and securely fenced? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, what kind and how tall?
How do you plan to ensure that your dog receives safe and adequate exercise?				
Where will the dog sleep?			Where do you plan to keep the dog primarily? <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors	
Do you plan to use a crate for housebreaking or while you are gone? Yes <input type="checkbox"/> No <input type="checkbox"/>				
PART IV PET HISTORY				
List all pets you currently own:				
Dogs:				
Breed:	Age:	<input type="checkbox"/> M <input type="checkbox"/> F	Spayed / Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No	Special Notes:
Breed:	Age:	<input type="checkbox"/> M <input type="checkbox"/> F	Spayed / Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No	Special Notes:
Breed:	Age:	<input type="checkbox"/> M <input type="checkbox"/> F	Spayed / Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No	Special Notes:
If not spayed or neutered, please explain:				

Cats:				
Breed:	Age:	<input type="checkbox"/> M <input type="checkbox"/> F	Spayed / Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Declawed
Breed:	Age:	<input type="checkbox"/> M <input type="checkbox"/> F	Spayed / Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Declawed
Breed:	Age:	<input type="checkbox"/> M <input type="checkbox"/> F	Spayed / Neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Declawed
If not spayed or neutered, please explain:				
Other pets:				
What activities do you plan on participating in with your adopted dog?				
Have you previously worked with a dog trainer or attended obedience training classes? Yes <input type="checkbox"/> No <input type="checkbox"/>				
If yes, which trainers or programs? If no, why?				
What kind of pet food do you currently feed your current pets? What do you plan on feeding your adopted dog?				
When you're not home where is your new adoptive dog going to stay?				
For what reasons would you return your dog back to us? Please check all that apply:				
<input type="checkbox"/> Moving homes	<input type="checkbox"/> Too time consuming	<input type="checkbox"/> Behavioral problems		
<input type="checkbox"/> Not getting along with other pets	<input type="checkbox"/> Allergies	<input type="checkbox"/> Housetraining issues		
<input type="checkbox"/> Getting out of a fence	<input type="checkbox"/> Dog medical problems	<input type="checkbox"/> Shedding		
<input type="checkbox"/> Children lost interest	<input type="checkbox"/> Personal medical problem	<input type="checkbox"/> Leash reactivity		
<input type="checkbox"/> Divorce	<input type="checkbox"/> New baby	<input type="checkbox"/> Other – please explain:		
Have you ever given a dog up or had a dog for a brief period of time and it didn't work out? Yes <input type="checkbox"/> No <input type="checkbox"/>				
If yes, please explain the circumstances:				
If your pet develops a medical problem that becomes expensive, what would you do?				
<input type="checkbox"/> Find another home for dog	<input type="checkbox"/> Pay whatever it takes	<input type="checkbox"/> Give him to a rescue group or shelter		
<input type="checkbox"/> Other – please explain:				
List any dogs you have previously owned:				

Breed:	How long owned?	Where is pet now? If deceased, cause of death:
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Breed:	How long owned?	Where is pet now? If deceased, cause of death:
Breed:	How long owned?	Where is pet now? If deceased, cause of death:
Have you ever had to give up a pet? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, why?

PART V DOG KNOWLEDGE

Are you aware the typical health problems that dogs have, and that this breed of dog may have?
Yes No

If yes to above, please elaborate?

Are you willing to take care of said problems should they arise even if the dog requires daily medication?
Yes No

Are you aware that dogs can shed year-round?
Yes No

Can you accept this?
Yes No

Most dogs are companion animals and want to be with you as much as possible. Are you prepared for this?
Yes No

Do you realize dogs can live upwards of 15 years and are you can commit to caring for it for its entire life?
Yes No

Please let us know anything else that would make you and ideal candidate for a rescue dog:

PART VI BEHAVIOR

What type of behaviors do you expect from this dog?

Please indicate issues you are confident handling?

<input type="checkbox"/> potty training	<input type="checkbox"/> mouthiness	<input type="checkbox"/> leash reactivity
<input type="checkbox"/> basic obedience (sit/down)	<input type="checkbox"/> food aggression	<input type="checkbox"/> dog aggression
<input type="checkbox"/> jumping up	<input type="checkbox"/> cat introductions	<input type="checkbox"/> fearfulness
<input type="checkbox"/> excessive barking	<input type="checkbox"/> dog reactivity	<input type="checkbox"/> people aggression

What amount of time and effort, per week would you want to devote training for your dog?
 None 3-5hrs 5-7hrs 7-10hrs 10+hrs

Are you likely to enroll your dog in obedience class? Yes " " No " "
If yes, do you have a trainer/program in mind? Yes " " No " "
If no, would you like a recommendation for a trainer? Yes " " No " "
Which family members would be expected to assist in home training?

What is your definition of disciplining your dog?	What are your training objectives?	Who will be the primary caregiver for this dog?
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PART VII REFERENCES

List **three** references that can attest to your suitability as a pet owner. If you own any pets now, please include your **current veterinarian** as a reference.

Name:	Email Address:
Phone:	Relationship:
Name:	Email Address:
Phone:	Relationship:
Name:	Email Address:
Phone:	Relationship:

Vet reference past or present:

Vet Name:	Clinic Name:
Phone:	Email Address:

TERMS OF ADOPTION WITH GINGER'S PET RESCUE (GPR)

1. _____ I agree to keep this dog in my personal possession, and to provide proper and sufficient food, water, shelter, training, affection, grooming and humane treatment at all times.
2. _____ I agree and understand that I am adopting a rescue dog and that, in doing so, I am continuing with the dog's rescue.
3. _____ I agree that, within 7 days of adopting the dog, I will take the dog to a veterinarian with the records which I have received in order to have the dog examined. I agree further to procure veterinary care at once if this dog becomes sick or injured, and to keep current all vaccinations as recommended by the veterinarian. Unless otherwise agreed to in writing, I am responsible

- for the cost of all veterinary care of the dog after adoption.
4. _____ I agree to obey any and all animal control regulations governing the area in which I live, and to license this dog according to such regulations within one month of adoption.
 5. _____ I agree not to sell, trade ownership, abandon, or dispose of this dog in any way (including to family members without the approval of GPR), but to notify and return the dog to Ginger's Pet Rescue if I must relinquish custody of the dog for any reason.
 6. _____ I agree to allow Ginger's Pet Rescue to examine the dog and its living conditions, and to surrender it if the living conditions are found by GPR unsatisfactory.
 7. _____ I agree to assume full responsibility for this dog actions, including any damage done by this dog.
 8. _____ I agree if not already done, I will microchip the dog within 30 days of adoption and/or ensure the microchip is registered to my name within 14 days of adoption.
 9. _____ I agree to list GPR as a contact on the dog's microchip registration for the life of the dog.
 10. _____ I agree that the dog will reside in my home as a pet.
 11. _____ I agree that it is my responsibility to see and evaluate the dog for myself before adopting.
 12. _____ I have read and agree to the terms of the GPR return policy, attached hereto. I understand that, if the dog is not returned in the condition in which it was received by me (as determined by GPR), GPR may apply all or a portion of the adoption fee I paid toward veterinary, grooming or other costs required to treat the dog. Further, I may also be responsible for additional costs of veterinary, grooming or other necessary care if these costs exceed the adoption fee I paid.
 13. _____ I acknowledge that GPR has provided in good faith what it believes to be appropriate veterinary and other information about this dog, but that the dog is provided by GPR "as is", so that the dog's temperament, health, habits and physical condition are not and cannot be guaranteed.
 14. _____ I agree and understand that, although the dog has received a veterinary examination and those records have been disclosed, the dog may have additional needs. I recognize and agree that these are not the responsibility of GPR and that, upon adoption, I assume full responsibility for any vetting or other issues related to the dog.
 15. _____ I agree that GPR is, and can be, in no way responsible for any damage, cost, accident or injury resulting from placement of the dog into my household.

All the information I have given above is true and complete. I have also read and agree with the above Terms of Adoption.

Applicant Signature:

Date:

Return Policy for Ginger's Pet Rescue

If the dog is returned in the first seven days there is a \$200 admin and rehoming fee Dogs returned after seven days but before fourteen days will have a \$300 deductible Dogs returned after 14 days will be allowed only at GPR discretion.

_____ I understand that if I want to return my dog for any behavioral issues, I may be required to consult with a GPR designated trainer at the rescue's expense. If I decline to consult with a trainer, I understand that I will not receive a refund of any of the adoption fee.

_____ I understand that in addition to the rehoming fee, a Medical Evaluation of \$85 will be automatically deducted from a refund for dogs returned after 30 days.

_____ I understand that, if the dog is not returned in the condition in which it was received by me (as determined by GPR), GPR may apply all or a portion of the adoption fee I paid towards, veterinary, grooming or other costs required to treat the dog. Further, I understand I may also be responsible for additional costs of veterinary, grooming or other necessary care, in the event that these costs exceed that adoption fee I paid.

FOR INTERNAL USE:

.. Accepted .. Rejected Reviewed By:

Date: