



# ADOPTION APPLICATION

## Golden Retriever Rescue of Central NY Inc.

**Complete, Sign & Send To:**  
**GRRCONY Inc.**  
**P.O. Box 735**  
**Jamesville, NY 13078**

### PERSONAL INFORMATION

Name of Applicant: \_\_\_\_\_  
 Name of Co-applicant (adults over 18 yrs. only) \_\_\_\_\_  
 Relationship to Applicant:  Spouse  Significant other  Roommate  Other \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Applicant's Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
 How did you hear about GRRCONY? \_\_\_\_\_

### DOG PREFERENCES

(This information will guide us in finding the Golden best suited to your situation. Applicants should understand that the more latitude indicated here, the higher the potential for finding a dog in the shortest period of time).

**SEX** \_\_\_\_\_  Prefer  Require If you answered "require," please explain: \_\_\_\_\_

**AGE** \_\_\_\_\_  Prefer  Require If you answered "require," please explain: \_\_\_\_\_

Would you consider a dog: Older than 3 years? \_\_\_\_\_ Older than 5 years? \_\_\_\_\_

Please list, **in order of importance**, the attributes you are seeking in a dog:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

1. Please explain why you want to adopt this animal:  Companion  Gift  Guard Dog  
 Personal Protection  For a Child  Other \_\_\_\_\_

### HOUSEHOLD & DOG CARE INFORMATION

- 2. Do you live in a:  House  Townhouse  Apartment  Duplex  Condo
- 3. Do you:  Own or  Rent
- 4. Do you have a fenced yard? What type of fence? \_\_\_\_\_
- 5. If you do not have adequate fencing (i.e., a totally enclosed, secure fence), how will you provide exercise for the dog? Consider bathroom time, as well as regular exercise. Who will supervise these outdoor activities (this includes all time the dog is outdoors).  
 \_\_\_\_\_  
 \_\_\_\_\_
- 6. If presented with an inexpensive alternative, would you consider fencing your yard? \_\_\_\_\_
- 7. How many adults in household? \_\_\_\_\_ Ages \_\_\_\_\_ Children? \_\_\_\_\_ Ages \_\_\_\_\_
- 8. Who will be responsible for the care of this pet? \_\_\_\_\_

9. Where would the pet be kept during the day? \_\_\_\_\_  
 At night? \_\_\_\_\_
10. Is there anyone home during the day? \_\_\_\_\_ Who? \_\_\_\_\_
11. How many hours a day will the pet be alone? \_\_\_\_\_
12. Who will care for the pet when you are on vacation? \_\_\_\_\_
13. If you move, what will you do with this pet? \_\_\_\_\_
14. Are you willing to take responsibility for this pet for the next ten years or more? \_\_\_\_\_
15. How much do you think it will cost to take care of this animal each year? Please consider the cost of veterinary care, food, grooming, toys, licensing, etc. \_\_\_\_\_
16. We require that all pets adopted from us be spayed or neutered. Do you have any questions about this policy? \_\_\_\_\_  
 Explain \_\_\_\_\_

**PET HISTORY**

17. Please list all the pets you have owned in the last five years (use additional paper, if necessary):

TYPE	SEX	AGE	SPAYED/ NEUTERED?	WHERE IS HE/SHE NOW?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

18. If you currently have pets, are all vaccinations current? \_\_\_\_\_ If you have another dog, does that dog take heartworm preventive? \_\_\_\_\_ If not, why? \_\_\_\_\_

19. If you have ever had a pet die at an early age or due to an accident, please give details below:

\_\_\_\_\_  
 \_\_\_\_\_

20. Have you attended obedience classes before? \_\_\_\_\_ Are you willing to attend in the future? \_\_\_\_\_

21. Why should GRRCNY place a Golden Retriever with you? What special things can you offer a dog?

\_\_\_\_\_  
 \_\_\_\_\_

**APPLICANT REFERENCES**

If you currently own or have owned a pet during the past three years, one reference **must** be a veterinarian. Other references may include neighbors, co-workers or Golden Retriever Club members. If you rent, please list landlord.

\_\_\_\_\_  
 Name/Relationship/Phone No.

\_\_\_\_\_  
 Name/Relationship/Phone No.

**APPLICANT SIGNATURE (S)**

I acknowledge that the information contained in this form is true and correct to the best of my knowledge. I understand that any misrepresentations of fact may result in the removal of the adopted dog from my home by the Golden Retriever Rescue of Central New York Inc. **I understand that there is a placement fee of \$250 for dogs under 8 years of age and a placement fee of \$100 for dogs from 8 to 11 years of age. (1/1/07)**

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Co-applicant (must be at least 18 yrs.)

\_\_\_\_\_  
 Date