

BAKU STREET DOG RESCUE ADOPTION APPLICATION

"Until one has loved an animal, a part of one's soul remains unawakened." — Anatole France.

Thank you for your interest in our adoption program. This application is to help you think about the ways adopting an animal will impact your life and to determine if adoption is right for you. The questions will help you judge aspects of pet ownership that should be given serious consideration before deciding to share your life with any animal.

PLEASE PRINT: Name Email Address Street Address Telephone work HOUSEHOLD INFORMATION: HOW MANY PEOPLE ARE IN YOUR HOUSEHOLD? Adults over the age of 21 (including self) Children (under 21) _____ Ages _____ Does anyone in the household have allergies to dogs? Yes Who? No **Do you live in:** House Apt. Do you: Own Rent If renting, are there any pet restrictions? Yes _____ No____ If yes, what are they? Landlord's name _____ Landlord's phone _____ *Describe your yard No yard _____ Unfenced yard ____ Partially fenced ____ Completely fenced _____ Height of fence _____ Made of? Wood _____ Chain Link ____ Other ____

*BSDR adopted dogs and puppies must be supervised at all times when outdoors.



If you do not have	ve a fenced in yar	d, do you agree to a	always keep yo	ur foster dog on a leash?				
Yes No _								
Do you have so	reens on your w	vindows? Yes	No					
Please list all your current pets:								
Dog/Cat	Breed	Name	Age	Male/Female Altered(Yes or No				
have any concerns		idea of adoption with		e vaccinated against rabies. If you , they may make additional				
	long you have o							
How would you	ı describe your l	evel of experience	e with dogs? (Check all that apply				
Never had	d a dog							
Had one o	or more as an adu	lt						
Had a chi	ldhood pet							
Have prev	vious foster/rescue	e/adoption experien	ce Please desc	ribe:				
Am a prof	fessional dog train	er						
Do you have ex	perience with:	Small dogs	Medium dogs	Large dogs				
What type of d	og are you inter	ested in fostering	?					
Adult dog								



How much	exercise (wa	alks, play) will the adop	ted dog receive daily?
Where will	the adopted	dog sleep at night?	
Where will	the adopted	dog stay while you are	at work or not at home?
How many l	hours during	g each workday will an a	dopted dog be without direct
Will you be	able to sepa	rate the adopted anima	I from your own animals? Yes No
			preference
			preference
_	e a preferen		
Administering medications			Other
Not good with other dogs/cats			Home visits
Reso	urce (food/to	y) aggression	
Not h	nousetrained		Veterinary visits
Provi	ding on-going	ı training	Very high activity level
Not g	good with sma	all animals/cats	Scratching/biting
Shy,	fearful, or un	socialized dog	Not good with children
Diggi	ing		Escaping
Exces	ssive barking		Destructive chewing
What situat	tions do you	feel unprepared for?	
	articular do		12 Tes No 11 yes, Nume.
	_	g vou have an interest ir	1? Yes No If yes, Name?
Senio		са абу, рарру	
Puppy		ed dog/puppy	
	log/puppy ,		



Notes/ Comments
Please provide us with three references, their phone number and email. All applicants are required to list references- we will not process applications without them.
We will always act in the best interest of the animals and as such reserve the right to deny the adoption in any anall situations we feel the best interest of the animal will not be served. All decisions of the management are final.
By signing below, I attest that all information provided in this application is accurate and valid.
Applicants Signature
Date