



Collie Rescue of Tampa Bay, Inc.

P.O.Box 14305, Clearwater, FL 33766-4305

Adoption Application

Thank you so much for your interest in adopting a dog from the Collie Rescue of Tampa Bay, Inc. We request the following information so that we can assist you in the selection of a new pet. This form and consultation with a representative from the rescue are designed to help you find the pet most compatible with your lifestyle. Please mail this form to the address listed above.

To be considered as an adopter, you must:

- ❖ Be 28 years of age or older.
- ❖ Have identification showing your present address.
- ❖ Have a fenced yard.
- ❖ Have the knowledge and consent of your landlord if you are renting.
- ❖ Be able and willing to spend the time and money necessary to provide medical treatment and proper care of the dog.

Completion of this application does not guarantee adoption of a dog from the Collie Rescue of Tampa Bay, Inc. Please print legibly and complete the form fully.

Applicant(s) Information:

Name: _____ Date: _____

Home Phone#: _____ Cell Phone#: _____

Full Address: _____

How long have you lived in this address? _____

E-mail Address: _____

Driver's License#: _____

Name of the pet you are interested in adopting: _____

Are you adopting for yourself or for someone else? _____

Will this be your first pet? Yes No

What kind of pets have you had in the past? _____

What happened to the pets you no longer have? _____

Please list all your current pet(s) below:

Name of your pet	Species/Breed of your pet	Sex	Spayed/Neutered?	Age	Up-to-date on shots?
		F · M	Yes · No		Yes · No
		F · M	Yes · No		Yes · No
		F · M	Yes · No		Yes · No
		F · M	Yes · No		Yes · No
		F · M	Yes · No		Yes · No
		F · M	Yes · No		Yes · No
		F · M	Yes · No		Yes · No

Where are your current pets kept? Indoor Outdoor Other (please explain)

What type & brand of your pet food are you feeding to your pet? (Please be specific)

Have you ever turned your pet in to a shelter or rescue? Yes No

If yes, please explain: _____

Have you ever had a pet euthanized? Yes No

If yes, please explain: _____

If you have pets, will they adjust to a new pet in the house? Yes No Don't Know

Do you have any dog training experiences? Yes No

If yes, what kind of dog training have you had? _____

Briefly describe your history of pet ownership or previous experience with animals.

Why do you want this pet? (Check all that apply.) Companion House pet

Companion for other pet Watch dog Guard dog Hunting/Herding

Personal Protection Farm dog Other (explain) _____

Please list everyone (**including yourself**) who currently resides in the address you provided:

Name	Age	Sex	Grade if in school	Work?
		F · M		Yes · No
		F · M		Yes · No
		F · M		Yes · No
		F · M		Yes · No
		F · M		Yes · No
		F · M		Yes · No
		F · M		Yes · No

What is your current occupation? _____

Who is your current employer? _____

Does your job require extensive travel? Yes No

Does everyone in the household agree upon adopting a new pet? Yes No

Does any member of your household have an allergy to dogs? Yes No

Is someone home during the day? Yes No If yes, who? _____

How many hours each day will the pet be without human companionship? _____

Where do you live? House Apartment Condo Mobile home

Other (explain) _____

Do you own or rent your home? Own Rent

If you rent, may we contact the owner to obtain permission for this pet to live in your home? Yes No

Owner/Landlord's name: _____ Phone#: _____

Do you have a completely fenced yard? Yes No Is there a gate? Yes No

What kind of fence? _____ Height of the fence: _____

Do you have a pet door? Yes No

Does your pet have an access to outside without your supervision? Yes No

If yes, please explain: _____

Where do you plan on keeping the new pet? Indoor Only Indoor/Outdoor

Outdoor Only In the Garage Other (explain) _____

Do you have a pool? Yes No If yes, is there a fence around the pool? Yes No

What kind of fence? _____ Height of the fence: _____

If you drive a pickup truck, would you allow the dog to ride in the back? Yes No

If you go away for a few days, or on a vacation, who will take care of the pet? _____

What arrangements will you make for the care of your pets in case of an emergency?

If you move, will you take the pet with you? Yes No

If no, please explain: _____

Are you willing to have a representative of the Collie Rescue of Tampa Bay, Inc. come to see where the dog will be living? Yes No

If no, please explain: _____

Are you willing to take responsibility for this dog for the next 10 to 15 years?

Yes No If no, please explain: _____

What provisions will you make for the dog should you become unable to care for him/her? _____

What kind of activities do you plan on doing with your new pet? Obedience
 Agility Herding Therapy Work Service Dog Training Search & Rescue
 Other (explain) _____

If your new pet is not housebroken, what method will you use to train him/her? _____

Are you able and willing to exercise the dog on a regular basis? Yes No

If yes, method of exercise: _____

Will you keep the pet up-to-date on vaccinations? Yes No

If no, please explain: _____

Name of your veterinarian: _____

Phone#: _____ Fax# _____

Full Address: _____

E-mail address (if any): _____

May we contact your veterinarian for reference? Yes No

Please provide two personal references (must not be family members or relatives):

Reference #1:

Name: _____ Relationship: _____

Full Address: _____

Phone#: _____ E-mail: _____

Reference #2:

Name: _____ Relationship: _____

Full Address: _____

Phone#: _____ E-mail: _____