



## 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?

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? \_\_\_\_\_

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

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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?

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: \_\_\_\_\_