NITTANY GREYHOUNDS ADOPTION APPLICATION

You must save this form to your computer, fill it out, then send it back as an attachment.

PERSONAL DETAILS

Name:						
Email:						
Employer:						
Are you currently	serving ac	tive duty in	the U.S.	Armed S	Services?	
Address:						
City:						
State:	Zip:					
Is your residence	: (Owned	Rented	I Ot	her	
NOTE: Please include the area code with phone numbers. (e.g. 814-555-555)						
Phone:						
Alt Phone:						
ABOUT YOUR HOUSEHOLD						
What is your age	range?	Unde	er 25	26-55	Over 56	
How many individuals (including children) live in your household?						
Do you have children under the age of 16? Age of youngest child?						
Even if you don't have children under 8 in your immediate household, would your grey ever be around younger children (i.e., grandchildren visiting, etc.)?						
Does anybody in your household have any physical restrictions?						
How many hours a day will the dog be without a human companion?						
What is the action	n level of y	our househ	old in ge	neral?		
Quiet	Active	Chaotic/	/Noisy			
PREFERENC	CES					
Do you have any preferences for gender? Male Female Any						
Do you have interest in a particular dog?						

Why do you want to adopt a greyhound?

REQUIREMENTS

You agree to keep your greyhound only as a pet.

You agree to keep your greyhound inside your house.

You agree to properly license your greyhound and follow all local and state regulations.

You agree to always keep your greyhound on a leash or in a fenced-in area when outside.

You agree to contact Nittany Greyhounds if you cannot keep your dog for any reason.

ABOUT YOUR PETS

Have you previously owned a greyhound?

Will you crate your dog if necessary?

Do you have a fenced-in yard?

Please list any other pets you have: (include type, breed, age, and gender)

Do you have a veterinarian?

REFERENCES

Please provide a personal reference: (name, address, phone, and relationship)

HOW DID YOU LEARN ABOUT US?

Where/How did you learn about us?

Additional details: