## Hi 5 Dog Rescue Adoption Application Form

Tel: (510) 987-6310 Email: info@hi5dogrescue.org

You must fill out this form as completely as you can

The information you provide will help us finding the best match for you and your family

Date Name(s) of Adopter				
Street Address/PO Box		City	State	Zip
Home Phone	Work Phone		Cell Phone	
Email				
Names of others in household (include age				
Length of time at address	🛛 Ow	n 🛛 Rent 🖵 Live	with parents 🛛 Military	
☐ House ☐ Condo ☐ Apartment No	Mobile Home	Ranch/Farm/Vi	neyard Size restrictions?	🛛 Yes 🗳
Fenced Yard? 🛛 Yes 🖵 No If Yes – type of fence:				
Landlord Name & TelephoneOk to call Landlord?				
How did you hear about our adoption program? 🛛 Friend/Family 🖵 Facebook 🗳 Craigslist 📮 Other:				
Please list your current veterinarian			City	

CURRENT PETS YOU & YOUR HOUSEHOLD		YOUR IDEAL DOG	
Type /Breed	Dog Experience	Ideal Breed Type/Mix	
Name	First-time Guardian	 Adult Size	
AgeSex	Have had one or two dogs	□ 0-20 lbs (Small)	
Spayed/Neutered 🛛 Yes 🖵 No	Knowledgeable & experienced	20-50 lbs (Medium)	
Kept 🗅 Inside 🗅 Outside 🗅 Both	<ul><li>Image: Time away from home</li></ul>	<ul><li>50-100 lbs (Large)</li><li>Over 100 lbs (Giant)</li></ul>	
How long have you been caring for this pet?	Home all day	Coat	
	Out part-time	□ Short □ Medium	
🕑 Type /Breed	Away 7-10 hours daily	<ul> <li>Long</li> <li>No preference</li> <li>Non-shedding</li> </ul>	
Name	Can bring dog to work	<ul> <li>Allergies in household</li> </ul>	
AgeSex	Our dog will	Age	
Spayed/Neutered 🛛 Yes 🖓 No	Live indoors only	🛛 8-16 weeks 🖵 Older	
Kept 🖵 Inside 🗖 Outside 🖓 Both	Live indoors/outdoors	□ 4-12 months □ No preference	
How long have you been caring for this pet?	Live outdoors only	1-3 years	
	Live in garage		
<b>③</b> Type /Breed	Be confined in a fenced yard	None Housetrained	
Name	Spend time in dog parks	Some Obedience Training	
Age Sex	Fully Trained		
	Chaotic Circus	Exercise Requirement	

## APPLICANT NAME:

PAST PETS - LAST FIVE YEARS           Type/Breed         Type/Breed         Type/Breed         Type/Breed         Name         PLEASE DESCRIBE THE IDEAL DOG TO FIT INTO YOUR LIFESTYLE         Name         N	Spayed/Neutered Kept Inside Out How long have you been ca	side Both	<ul> <li>Controlled activities</li> <li>Spa retreat</li> </ul>	<ul> <li>Low Medium High</li> <li>Sex</li> <li>Male Female No</li> <li>preference</li> </ul>
Type/Breed       Type/Breed       Type/Breed       Name         Name       Name       Name       Name         Age       Spayed / Neutered       Yes       No         Spayed / Neutered       Yes       No       Spayed / Neutered       Yes       No         Spayed / Neutered       Yes       No       Spayed / Neutered       Yes       No       Spayed / Neutered       Yes       No         Kept       Inside       Outside       Both       Kept       Inside       Outside       Both         How long did you care for this pet?         PLEASE DESCRIBE THE IDEAL DOG TO FIT INTO YOUR LIFESTYLE       IFESTYLE         State, Zip:       Relationship:       Ifestionship:         City, State, Zip:       Feferences       Phone:         Address:       Relationship:       Ifestionship:         City, State, Zip:       Ifestionship:       Ifestionship:         City, State, Zip:       Ifestionship:       Ifestionship:         Address:       Ifestionship:       Ifestionship:         City, State, Zip:       Ifestionship:       Ifestionship:         City, State, Zip:       Ifestio				•
Name	Type/Breed	-		Type/Breed
Age				
Spayed / Neutered       Yes       No       Spayed / Neutered       Yes       No         Kept       Inside       Outside       Both       How long did you care for this pet?       No       Kept       Inside       Outside       Both         How long did you care for this pet?       PLEASE DESCRIBE THE IDEAL DOG TO FIT INTO YOUR UPERSTYLE       How long did you care for this pet?       How long did you care for this pet?         PLEASE DESCRIBE THE IDEAL DOG TO FIT INTO YOUR       PERSTYLE       How long did you care for this pet?         Name:       PLEASE       Phone:       Phone:         Address:       Phone:       Phone:       Phone:         Address:       Phone:       Phone:       Phone:         City, State, Zip:       Phone:       Phone:       Phone:         Phone:       Phone:       Phone:       Phone:         City, State, Zip:       Phone:       Phon				
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PLEASE DESCRIBE THE IDEAL DOG TO FIT INTO YOUR LIFESTYLE         REFERENCES         Name:       Phone:         Address:       Relationship:         City, State, Zip:       Email:	Kept 🛛 Inside 🖵 O	utside 🖵 Both 🛛	Kept 🖵 Inside 🖵 Outside 🖵 Both	Kept 🖵 Inside 🖵 Outside 🖵 Both
REFERENCES         Name:       Phone:         Address:       Relationship:         City, State, Zip:       Email:         Name:       Phone:         Address:       Relationship:         City, State, Zip:       Email:         Name:       Phone:         Address:       Relationship:         City, State, Zip:       Phone:         Name:       Phone:         City, State, Zip:       Email:	How long did you care fo	or this pet?	How long did you care for this pet?	How long did you care for this pet?
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STAFF COMMENTS	5.01 V0101E. A.W. I			
			STAFF COMMENTS	

		APPLICANT NAME:
Date	_ APPROVED	_ LANDLORD APPROVAL DATE