



# Rainbow Rescue & Retreat

Animal Sanctuary & LGBTQ+ Retreat

(910) 691-3859

rainbowrescueandretreat@gmail.com

## **Adoption Application**

Full Name: \_\_\_\_\_

Pronouns (select all that apply): he/him she/her they/them Other: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

How long at this address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Best time to call: \_\_\_\_\_

Email address: \_\_\_\_\_

## **Family & Housing:**

How many adults are there in your household and their relationship to you?

\_\_\_\_\_

How many children (ages)? \_\_\_\_\_

What best describes your home? (Single family house, townhouse/condo, Apartment, farm, etc...)

\_\_\_\_\_

Please describe your household: \_\_ Active \_\_ Noisy \_\_ Quiet \_\_ Average

Do you own or rent? \_\_\_\_\_ Provide rules governing pets and the leasing office/landlord's name & number:

\_\_\_\_\_

\_\_\_\_\_

(By providing this information you consent to Rainbow Rescue & Retreat, LLC. to contact your leasing office/ landlord)

Do you live in a County, City or neighborhood/community that has ANY pet restrictions, such as number of pets allowed and/or breed restrictions? If so, please list.

\_\_\_\_\_

Do you have a fenced yard? What kind of fence? If not, How will the dog get exercise and be taken outside? \_\_\_\_\_

\_\_\_\_\_

Does anyone in the family have a known allergy to dogs? \_\_ Yes \_\_ No

Is everyone in agreement with the decision to adopt a dog? \_\_ Yes \_\_ No

Do you have time to provide adequate training, love and attention? \_\_ Yes \_\_ No

Is the dog going to be a surprise or gift? \_\_ Yes \_\_ No



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If so for whom? \_\_\_\_\_

## **Other Pets:**

What other pets do you currently have? (specify name, age and type)

\_\_\_\_\_  
\_\_\_\_\_

Are these pets up to date on vaccines? \_\_ Yes \_\_ No

Are these pets current on heartworm and flea/tick prevention? Which do you Use? \_\_ Yes \_\_ No

Prevention: \_\_\_\_\_ Where do you purchase it? \_\_\_\_\_

Are these pets spayed/neutered? \_\_ Yes \_\_ No If not, why? \_\_\_\_\_

(We normally will NOT adopt to you if you have not spayed or neutered your pets unless there is a  
medical reason for not doing so.)

Have you owned other pets in the last ten years? \_\_ Yes \_\_ No If so, what type?

\_\_\_\_\_  
\_\_\_\_\_

Have you ever surrendered a pet? \_\_ Yes \_\_ No

If so, why? \_\_\_\_\_

Have you ever had a pet euthanized? \_\_ Yes \_\_ No

If so, why? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you ever lost a pet to an accident? \_\_ Yes \_\_ No

What happened? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How do you train & discipline your pets?

\_\_\_\_\_  
\_\_\_\_\_

## **Veterinarian Contact:**

Do you have a regular veterinarian? \_\_ Yes \_\_ No

Veterinarian's name: \_\_\_\_\_

Clinic Name: \_\_\_\_\_

Clinic Address: \_\_\_\_\_

Clinic Phone: \_\_\_\_\_

Owner's name associated with that pet, if other than you: \_\_\_\_\_

(By providing this information you authorize us to call your vet. Please call your vet and ask them to



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authorize the Release of Information for reference check.)

Do you have an Emergency Veterinarian for unexpected incidents? \_\_ Yes \_\_ No

Veterinarian's name: \_\_\_\_\_

Clinic Name: \_\_\_\_\_

Clinic Address: \_\_\_\_\_

Clinic Phone: \_\_\_\_\_

## **About the Dog You Wish to Adopt:**

Age: \_\_\_\_\_ Size: \_\_\_\_\_ Breed: \_\_\_\_\_

Sex: \_\_ Spayed Female \_\_ Neutered Male \_\_ No preference

Willing to adopt:

\_\_\_ outgoing/hyper dog \_\_\_ shy dog \_\_\_ dog that needs regular medication

\_\_\_ dog that needs training \_\_\_ dog that needs grooming \_\_\_ None of these

Where will the dog spend the day? (Describe)

\_\_\_\_\_  
\_\_\_\_\_

Where will the dog spend the night? (Describe)

\_\_\_\_\_

Number of hours (average) dog will spend alone daily?

\_\_\_\_\_

Who will have primary responsibility for this dog's daily care?

\_\_\_\_\_

Who will have financial responsibility for this dog?

\_\_\_\_\_

Who will care for the dog in your absence (vacations/emergencies)?

\_\_\_\_\_

## **Do you agree to the following?**

Keep the dog as an indoor dog? \_\_ Yes \_\_ No

Provide regular health care by a Licensed Veterinarian? \_\_ Yes \_\_ No

Keep the dog on monthly heartworm and flea/tick prevention? \_\_ Yes \_\_ No

Allow a pre-adoption and post-adoption visit to your home? \_\_ Yes \_\_ No

(This is always scheduled by appointment at your convenience)



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## **Personal References:**

Please list someone who is familiar with both you and your pets. Two references are required.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship (relative, neighbor, friend, etc.): \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship (relative, neighbor, friend, etc.): \_\_\_\_\_

## **PLEASE CONSIDER THE FOLLOWING:**

A dog can live for a long time – 10, 15, even 20 years. We try to place dogs in "forever" homes.

We see dogs surrendered for various reasons. Often the adopters were not prepared to cover the cost of vetting or training required for their new pet.

Older dogs are harder to rehome than puppies, placing an extra burden on rescuers.

We look at the age, breed characteristics & habits, as well as the commitment the adopter is able & willing to place on their adopted dog. We try to match the dog's temperament & potential needs to the adopter's ability to provide for the dog.

During your dog's life, which of the following would be a reasonable situation to cause you to give up your dog? There are no right or wrong answers.

☐ Moving to another state/country

☐ Getting married or divorced

☐ Having a baby

☐ Chewing on furniture or possessions

☐ Too expensive

☐ Dog is elderly

☐ Dog's health (arthritis/diabetes/cancer/etc)

☐ Not housetrained

☐ Moving in with parents or friends

☐ Moving into a new "no pet" apartment or house

☐ Children won't take care of dog

☐ Dog doesn't like new puppy/kitten

☐ Other: \_\_\_\_\_

☐ None of the above

Please use this space to tell us about yourself and share any additional information you feel is important :

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I have read, understand, and agree to the above terms for adopting from Rainbow Rescue & Retreat, LLC.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If Applicable, Co-Adopter)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_