

**Please EMAIL completed application back to
adopt@caffeinatedcaninerescue.org**

Caffeinated Canine Rescue
adopt@caffeinatedcaninerescue.org
www.caffeinatedcaninerescue.org

Check all the boxes that apply to you:

<input type="checkbox"/>	VOLUNTEER	<input type="checkbox"/>	FOSTER	<input type="checkbox"/>	ADOPT
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Name of pet(s) you are interested in adopting: _____

Applicant Name: _____

Home Phone:(____) _____ - _____ Cell Phone: :(____) _____ - _____

Email Address: _____

Occupation / Employer: _____

How long have you been employed at your current workplace? _____

Co-Applicant Name: _____

Cell Phone: :(____) _____ - _____ Email Address: _____

Occupation / Employer: _____

How long have you been employed at your current workplace? _____

Do you have children? No YES

Why are you looking at adopting a dog at this time?

Address: _____

City, State, Zip: _____

How long have you lived at your current address? _____

Do you rent your home or own it? Own Rent*

**If you rent, please provide your landlord's name and phone number:*

*Any breed or weight restrictions? No YES: _____

*Do you have permission to have a dog at this address? No Yes

*Is there a pet deposit and/or monthly fees required? No Yes

Is the residence **Fenced**? No YES*

**Describe the height/material of the fencing:* _____

How do you plan to exercise your pet? _____

Provide three (3) References with contact information (at least one should not be a relative):

Name	Phone Number & Email address	How do you know this person?

What is your family's lifestyle like?

- Active and on the go Quiet and relaxed
 Entertain frequently Lots of kids in and out
 Travel frequently (with pets) Travel Required (pets in boarding)

Due to the unknown history of rescue pet(s) and a focus on safety and stability, all adults in the home must be in agreement to the placement. Homes with children are considered on a case-by-case bases. Temperament testing and observations of the dog(s) in foster placements are used to give guidance on appropriate adoptive placements.

Must list everyone in the home, including yourself:

Name	Age

Who will be responsible for taking care of the dog? _____

How many hours per day will the dog be alone? _____

Where will the dog stay when no one is at home? _____

Where will the dog stay when you are at home? _____

Where will the dog sleep at night? _____

Who will care for your dog when you are out of town (vacation, etc.)?

Do kids or other dogs visit your property? No YES*

Current Pet Information

Please provide the following information about your current pets:

Name	Breed & Type <i>(Please specify if cat, dog, or other)</i>	Age	Male/ Female	Spay/ Neutered	UTD on Vaccines

If applicable, please provide the following information about any pets you have had in the last 5 years that are no longer with you.

Pet Name and Type	Explanation:

Do you consent to releasing pet(s) information to Caffeinated Canine Rescue? No Yes

Current Veterinarian: _____

Practice Name: _____

Address: _____

City, State, Zip: _____

Office Number: :(_____) _____ - _____

Vet Cell (if applicable*) (_____) _____ - _____ *Mobile Vets/no office.

*PLEASE NOTIFY YOUR VET CLINIC THAT A RESCUE VOLUNTEER WILL CALL
AS PART OF THE ADOPTION PROCESS IF MATCHED TO A DOG*

I/We have discussed the financial cost of a pet – *This includes but is not limited to food, training, boarding (if necessary), regular vet care, emergency vet care, heartworm preventative and flea and tick preventative.* No YES

After adopting a dog do you have a place to separate the new dog from kids or other dogs in the home during introductions? No YES

Do you have a crate or experience with crate training? No YES

Do you have experience with housetraining a pet? No YES

How will you deal with behavioral issues that may come up such as; separation anxiety, chewing personal property; digging outside or leash reactivity?

Under what condition(s) would you give up your dog?

Do you have a trainer? No YES*

*If YES contact information for dog trainer is:

Name: _____

Business Name: _____

Location of training (city/state): _____

Phone Number: (____) _____ - _____

Email or website: _____

FOSTERS

FOSTERS acknowledge foster dog(s) belong to Caffeinated Canine Rescue.

Fosters are given first option to adopt. (This is at the discretion and approval of the board).

Any and all applicants must be processed and approved by the adoption team.

If a foster feels that they are unable to care/handle the dog(s), they will contact the rescue to arrange transfer to another foster. Dog will be kept inside, safe from harm until transferred. All medical needs must go through the RESCUE.

Please READ the following pet ownership expectations.

I am prepared to make a 10–15-year commitment to this Pet -rescue dog-	
Register dog's microchip with contact information and keep information current. Any required city/county/state licensing or registration will also be completed.	
I will keep my dog on heartworm preventative as directed by my Veterinary. I will administer flea presentation *oral, topical or collar (tick control as needed).	
I will work with my vet and agree on a regular schedule for wellness visits, vaccinations, and any other tests as deemed necessary by a licensed Veterinarian for the health and well-being of my dog.	
I will not hit or abuse this dog physically, mentally, or emotionally (withholding of food, extended periods of isolation or use of pain inflicting methods of training) I will employ the help a certified dog trainer for any behavioral issues.	
My dog will be an indoor dog and an important member of my family. I will not use a garage, shed, or any non-climate-controlled building to house my dog for any reason at any time. At no time will the pet be chained or tie-up.	
I/We acknowledge Caffeinated Canine Rescue may not have knowledge of any dog's full history, including bite history. While rescue will disclose any history known/observed, it is adopter's obligation to become familiar with the breed and its requirements and provide the necessary steps/training to best fit into their household. Caffeinated Canine Rescue shall assume no responsibility and be held harmless for any aggressive behavior. Aggressive behaviors can be signs of stress or illness/pain and appropriate professionals should be contacted (medical and/or training assessment).	
If for any reason, I am unable or unwilling to keep this dog, I contact rescue to discuss options for return. I will not give the dog away, take it to a shelter, place him/her with another person or family member, or sell this dog to any other person without written notification to Caffeinated Canine Rescue. Rescue will require a completed and signed Owner Surrender form for a returned pet.	
I understand that there is an adoption fee. This fee is <i>nonrefundable</i> . <i>Adoption fees include transport fees for dogs traveling outside of Houston, Texas</i> <i>Transport fees are paid to a third party for travel and are nonrefundable.</i>	

Print Name(s): _____

Signature(s): _____

Date: _____

Thank you!