

GSD Dobie Rescue of Florida



ADOPTION APPLICATION

Applicant Name			Occupation		Drivers Lic	:ense#	#	Birth Date	
Spouse/Co-Applicant Name			Occupation		Drivers License#			Birth Date	
Address									
Applicant Pho	ne			Applicant Email					
Spouse/Co-Ap	plicant Phone	M			Spouse/Co	о-Арр	licant En	nail	
Own Rent?	How Long	Home	Apt/Condo	Mobile	Pets Allowed Y / N			Yard Y / N	
	100				Fence Y/N		Type:	Height:	
Landlords Nan	ne/Number		30	- 43		00/			
List All Occupa	ints even if alr	eady liste	d on this form	n. Use extra	paper for a	ny ac	lditional	information.	
Adults	Children	Age	Disposition /	' Allergies	NO ZU				
		20%	The State of the	100	144	1			
	-	1			Valle	7			
		6000	Jan J	1 Blan	400				
		100	DSSS	62790	ALC: D				
Explain all NO	answers.	1			7				
Other Pets? Breed	Name	Sex	Spayed / Neutered	Age / Years Owned	Current Vaccines		rtworm vention	Medical Conditions	
		100	Y/N		Y/N	١	/ / N		
			Y/N		Y/N	١	/ / N		
			Y/N	69/6	Y/N	١ ١	/ / N		
Veterinarians	Name, Addres	s, Phone	Number	THE .	313	P.			
May we conta	ct your Veterii	narian? Y	/ N	What is the	e Breed you	ı're ap	plying f	or? GSD / Dobie	
Are you famili	ar with Breed	plying for? Y	/ N Have you ever owned a GSD / Dobie						
Who will prim	arily be respor	nsible for	the care of th	is dog?					
Do you work f	rom Home? Y	/ N	Do you trave	el for work?	Y/N	How	many da	ays a month?	
What will you	do with the do	og during	your travel?						
Where will the	Dog be in the	P Day?	How long	Where	e will the Do	og be	in the N	ight? How long	
Where will the	Dog be kept	're not Home	re not Home?		Average hours the Dog will be alone?				
					Willing to	hire a	dog wa	lker/sitter? Y / N	

Print: Sign: Date: pg 1 of 2



Print:







ADOPTION APPLICATION cont..

	easons for wa	anting this	dog? Please	Circle	Temperan	nent/activity le	evel of Adopt	ers.	
Companion	Guard dog	Hunting	Exercise	Other	High	Mellow	Outdoorsy		
The noise/activ	ity in my hon	ne is usual	ly	Temperam	ent/activity	v level you're l	ooking for in	a dog	
High	Medium	Low	Other	High	Mellow	Affectionate	Outdoorsy	Guard Dog	
Are you willing	and/or able t	to adopt a	Special need	s Dog? Y/N	N				
Are you willing	to Hire an Ob	oedience t	rainer if need	led? Y/N					
Bad dog habits	that I cannot	tolerate a	ire:						
My ideal dog w	ould:				B	B.			
Are alll members of the Household aware and agree to Adoption? Y/N									
Have any family members EVER been Investigated or Convicted on Animal Control Violations? Y / N									
If YES explain	FRE	- The			DOT .	2.3			
Please initial the following:									
I/We understand and agree that GSD Dobie Rescue of Florida makes no express or implied warranty,									
representation or promise to the age, health, breed, habits, disposition or safety of the animal. I hereby accept									
the animal as is, assume all risks and responsibilities associated with the ownership of the Animal, including									
bites, and I hereby fully and completely release, indemnify and hold harmless GSD Dobie Rescue of Florida, its									
volunteers, Owners, and employees from any claim, cause of action or liability of any sort or nature, whether									
known or unkn	-					ith the adopti	on, care or o	wnership,	
maintenance, t	emperament	or conditi	ion of the Ani	imal	De A	nitial			
I/We agree to	llaw CCD Da	hio Dosque	of Florida to	do a Home	Visit prior	to Adoption	In		
I/We agree if I cannot keep the animal, he/she will be returned to GSD Dobie Rescue of Florida. All monies with									
I/We agree if I			W10-07 15	5 4 9		bie Rescue of	Florida. All r	itial monies with	
I/We agree if I be considered	cannot keep t	the animal	l, he/she will	be returned	to GSD Do	bie Rescue of Initi			
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Date:

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Sign: