**A picture containing diagram

Description automatically generatedAdoption Application**

If you are interested in adopting one of our available animals, please complete this adoption application and return this form via email to [themadduxmovement@gmail.com](mailto:themadduxmovement@gmail.com)

Please be aware that the animal you are applying for may already have pending applications by the time you submit your application. We will make every attempt to return your email as quickly as possible.

\*\*Responses may take up to 48 hours.\*\*

(QUESTION) (RESPONSE AREA)  
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|  |  |  |
| --- | --- | --- |
| Today's Date:\* (MM/DD/YYYY) |  | |
| Name of the animal you’re interested in:\* |  | |
| First Name:\* |  | |
| Middle Name:\* |  | |
| Last Name:\* |  | |
| Gender:\* |  | |
| Address:\* |  | |
| City:\* |  | |
| State:\* |  | |
| Zip Code:\* |  | |
| While we are open to out of state adoptions, we do not currently offer any transport services. Adopters must be able to attend local meet and greets in Atlanta, Georgia without the guarantee of adoption. Each adopter has a 10 day foster to adopt period and must be able to personally (no transport services) return the dog directly to TMM in Atlanta, Georgia **by Day 10** at their own expense if the adoption does not work out within the home (signed via contact). Any adoption fees paid will then be forfeited and used as a donation toward future rescue dogs for TMM. | | |
| Email Address:\* |  | |
| Telephone Number (best number to reach you):\* |  | |
| Your Date of Birth:\* (MM/DD/YYYY) |  | |
| Driver License Number:\* | |  |
| Driver License State:\* |  | |
| Driver License Issued Date:\* |  | |
| Driver License Expiration Date:\* |  | |
| Occupation:\* |  | |
| Employer Name:\* |  | |
| How long have you worked for the above employer?\* |  | |
| If you have a Facebook account, please paste the link here:\*  Type NA if not applicable. |  | |
| If you have an Instagram account, please paste the link here:\*  Type NA if not applicable. |  | |
| Do you live in a house, condo/townhome, apartment, or a mobile home?\* |  | |
| How long have you lived at your current address?\* |  | |
| Do you rent or own your home?\* |  | |
| If renting, please provide your landlord's name and phone number:\*  Type NA if not applicable. |  | |
| Do you have a fenced yard?\* |  | |
| If so please list the type and height of the fencing:\*  Type NA if not applicable. |  | |
| If you do not have a fence, what is your plan for the dog you are going to adopt to go to the bathroom?\* |  | |
| Do you have a pool?\* |  | |
| If so is it in ground or above ground?\*  Type NA if not applicable. |  | |
| How will the dog be kept safe from the pool?\*  Type NA if not applicable. |  | |
| Are you planning to move within the next year, and if so, what are your plans for your companion animal when you move?\* |  | |
| What provisions have you made for your companion animal in the event of your illness or death?\* |  | |
| How many adults live in your home and what are their relationships?\* |  | |
| What is the full legal name of your significant other?\* |  | |
| What is the phone number for your significant other?\* |  | |
| How many children live in the home and what are their ages?\* |  | |
| Please explain what experience your children have with pets:\*  Type NA if not applicable. |  | |
| Do you frequently have children visit your home?\* |  | |
| Please describe the energy level in your home:\* |  | |
| Are all members of your household aware of your plans to adopt an animal?\* |  | |
| Does anyone in your household smoke, and if so, where?\* |  | |
| Are any members of your household allergic to animals? If yes, please describe the severity of their allergies:\* |  | |
| Where will your companion animal sleep?\* |  | |
| How many hours per day will your companion animal be alone?\* |  | |
| Who will have primary responsibility for the animal?\* |  | |
| Do you have any health conditions which could restrict your ability to care for an animal? If so, please explain:\* |  | |
| How often do you go on vacation, and who will care for your companion animal when you go?\* |  | |
| Do you have any cats? If so, how many?\* |  | |
| If you answered yes to the above question, please state the name/breed/age of each one:\*  Type NA if not applicable. |  | |
| If you own cats, do they live indoors and/or outdoors?\*  Type NA if not applicable. |  | |
| If you own cats, are they declawed?\*  Type NA if not applicable. |  | |
| Are your cats spayed or neutered?\*  Type NA if not applicable. |  | |
| Do you have any dogs? If so, how many?\* |  | |
| If you answered yes to the above questions, please state the name/breed/age of each one:\*  Type NA if not applicable. |  | |
| If you own dogs, do they live indoors and/or outdoors?\*  Type NA if not applicable. |  | |
| Are your dogs spayed or neutered?\*  Type NA if not applicable. |  | |
| Do you have any other animals? If so, please describe:\*  Type NA if not applicable. |  | |
| Please give the name, address, and phone number of your veterinarian:\* |  | |
| Please list any other animals you have owned in the past 10 years (other than the ones listed above) and where they are now:\* |  | |
| Have you ever turned an animal into an animal shelter or rehomed one of your pets? If so, please explain why:\* |  | |
| Have you previously adopted from an animal shelter or rescue group? If yes, which one?\* |  | |
| Why do you want to adopt an animal?\* |  | |
| What type of personality are you looking for in a pet?\* |  | |
| Tell us a little about yourself (hobbies, interests, etc.):\* |  | |
| Do you plan to do any structured activities with the animal (agility, lure-coursing, hunting, dock diving, obedience)?\* |  | |
| What is your experience with housebreaking, and how do you plan to accomplish housebreaking if the pet you wish to adopt is not housebroken?\* |  | |
| What brand of food do you plan to feed your pet?\* |  | |
| Will the food be canned, dry or mixed?\* |  | |
| Does the above brand use human grade ingredients?\* |  | |
| Are you aware of the difference between feed/pet grade and human grade ingredients being used in the pet food industry?\* |  | |
| If you answered no to the above question, are you interested and/or open to learning more?\*  Type NA if not applicable. |  | |
| If TMM requires a specific food brand and/or type to be fed for this dog, are you willing to commit and maintain feeding that brand, no matter the cost, signed via the adoption contract?\* |  | |
| **By breaking any part of the adoption contract, TMM has the right to retrieve any dog that has adopted from our rescue at any time.** | | |
| I acknowledge, understand and agree to the above statement.\*  Please type your full name (first, middle and last). |  | |
| If your pet became ill, how much would you be able to spend on emergency care?\* |  | |
| How much do you expect to spend on routine care for your new family member?\* |  | |
| Do you understand that all veterinary expenses incurred post-adoption will be your responsibility?\* |  | |
| Do you understand that while we do our very best to have animals checked thoroughly by our vets to ensure their health, sometimes illnesses may not present themselves until after adoption?\* |  | |
| Are you applying for an animal with any other rescue or looking at breeders for puppies/kittens at the present time; meaning have you put in or do you plan to put in an adoption application elsewhere as well as with us?\* |  | |
| If necessary, how will you discipline the animal?\* |  | |
| What flea/tick and heartworm products do you or have you used?\* |  | |
| Will you use the previously mentioned brand for your new pet?\* |  | |
| Do you understand the importance and agree to give flea/tick and heartworm preventatives monthly or annually? \* |  | |
| In your own words, tell us what you know about heartworm disease:\* |  | |
| Do you have previous experience with owning a Dalmatian?\* |  | |
| Are you familiar with the dietary needs of a High Uric Acid (HUA) Dalmatian?\* |  | |
| In your own words, tell us what you know about purines and how they can affect a High Uric Acid (HUA) Dalmatian:\* |  | |
| Are you aware that allergies (both environmental and food) are common with the Dalmatian breed?\* |  | |
| Are you aware that Dalmatians are extremely high in shedding and will shed 12 months a year?\* |  | |
| I hereby certify that all information supplied by me on this application is true.\*  Please type your name. |  | |
| DATE:\* |  | |

Bottom of Form

All of our dogs are spayed/neutered, microchipped and up to date on vaccinations (including leptospirosis and canine influenza). Additionally, each adopted dog will be sent home with a new Fi Series 3 GPS Tracker Smart Dog Collar (with a 6 month subscription), a copy of The Forever Dog Life by Rodney Habib and Dr. Karen Becker, a Dalmatian dog blanket and a personalized adoption kit catered to each individual dog. As a small but quality focused rescue, we look forward to setting you and your new family member up for success!

**\*Please check The Maddux Movement website for any associated adoption fees.**

**This will be listed under each dog’s bio on the “Available Dogs” page.**

[https://themadduxmovement.godaddysites.com/](https://themadduxmovement.godaddysites.com/?fbclid=IwAR2yCvfITI3fwsuOTe_XXNVGsrPj2qT73ZTJtUNj3_rwNxJymjP-9YBHx7s)