

Ruff Life Rescue & Rehabilitation, Inc. ADOPTION APPLICATION

Thank you for considering adoption! Before you decide to adopt a pet, please consider the time, effort and funds necessary to properly maintain an animal. Responsible pet ownership requires a commitment to provide care and companionship for the life of the animal. The decision to adopt a pet is an important one. In order to insure that you and your pet will be happy for years to come, we need to take time to discuss your and the animal's individual needs and personality traits. Please take a few moments to carefully read and complete this application. Please note there are no wrong answers. This is to ensure that the cat/dog you are interested in is a good fit for you and your home.

To qualify for adoption, you must:

- Be at least 21 years old and have a valid driver's license or state Identification Card stating your current address
 - Have the knowledge and consent of a landlord, if relevant
- Be able and willing to spend the time and money necessary to provide medical treatment, proper nourishment, care, and training for a pet Please note: We reserve the right to refuse adoption to anyone. Please be advised that we will not adopt to persons who mislead or fail to provide accurate information on this application.

Personal Inf	<u>formation</u>						
Full Name							
	Address (Street)						(Zip)
How long at the	his address: (rs.) *If le	ss than 2 ye	ears, list pre	vious addre	sses for past 7 years:	
				Driver	License #		
Email Address	:						
Spouse/Partn	er Full Name:						
Spouse/Partner Full Name: Address (Street) Law less of this address (Vss.) *!f les			(City)			(State)	(Zip)
How long at the	his address:(\	rs.) *If le	ss than 2 ye	ears, list pre	vious addre	sses for past 7 years:	
Email Address	:						
(By providing the Family & Ho	ousing	e allowing us	to contact y	our landlord.	Please infor	m them of this call so th	ney will speak with us)
List all members living in the household (nam Name		enoia (nam			Relatio	onship	Other Info (optional)
			0-				
Current & Pa	st Pets of your current pets	and pets ow	vned in the	past 5 year	s		
Dog or Cat	Breed	Nar	ne	Age	M/F	Spayed/Neutere	ed Living or Deceased (reason)
				1	-	_	

^{*}Please use back of application if you run out of space. We require all other animals in your home be up to date on vaccinations.

Veterinarian	
Please list veterinarian that has seen your current pets, both past and	present. If no yet, please contact local yets to be sure they
are accepting new patients (many are not at this time). List veterinal	
Veterinarian/Clinic Name:	
Clinic Address:	
Clinic Phone:	
(By providing us with this information, you are allowing us to call your vet.	Places call your yet and ask them to authorize the release of
information to us)	Please call your vet and ask them to authorize the release of
mornation to asj	
General Information	
Have you ever surrendered a pet?YesNo	
If so, why?	
If so, why?	
If so, explain:	
Does anyone in the family have a known allergy to cats/dogs?	YesNo
How do you discipline your pets and why?	
Where will the cat/dog spend the day? (Describe)	
Where will the cat/dog spend the night? (Describe)	
Number of hours per day (average) cat/dog will spend alone?	
Who will have primary responsibility for this cat/dog's daily care?	
Who will have financial responsibility for this cat/dog?	
Do you agree to provide regular health care by a Licensed Veterinaria	
Do you agree to keep the cat/dog as an indoor cat/dog?Yes!	
For cats, do you plan to declaw?Yes No If Yes, why?	
For dogs, when outside, how do you plan to supervise it?	
Do you have a fenced yard?YesNo Height:	
Do you agree to contact us if you can no longer keep this cat/dog?	
Are you willing to let a representative visit your home by appointme	ntrresNo
Developed Defension	
<u>Personal References</u>	
Please list 2 people who are familiar with both you and your pets.	
Name:	
Address:	
Phone:	
Relationship (relative, neighbor, friend, etc.):	
Name:	
Address:	
Relationship (relative, neighbor, friend, etc.):	
I certify that the above information is true and correct to the best of	my knowledge. I also acknowledge falsification of the above
can result in my being denied adoption of an animal or, if an animal l	
Rescue and Rehabilitation, Inc. I agree to have this dog/cat reside IN	•
food, plenty of fresh water, indoor shelter, affection, annual physical	examination and vaccinations under the supervision of a
licensed Veterinarian.	
(Signature)	(Date)
75-0	\ <i>j</i>
RLR Witness	(Date)

^{***}Please sign/date this application and read the agreement below carefully and sign/date. Thank You.

For Fostering with Intent to Adopt:

Please read the following carefully:

RLR determines the criteria for fostering, decides which animals are eligible for foster care. We will inform you of any medical treatments to be administered, the anticipated length of the foster-care period, the objectives of each particular placement (restoring to health, rearing to adoptable age, socialization, etc.), and any other restrictions or expectations we may have.

You will be expected to keep the animal safe and secure, return it to RLR when requested to do so, and not promise the animal to anyone, or imply that you have the authority to approve a potential adoption. RLR retains ownership of all animals placed in foster care, and will make all decisions regarding the adoption and placement of the animals fostered.

RLR cannot accommodate people fulfilling court-ordered community service within the Foster Care Program. RLR does not accept into this program those convicted of violent crimes or crimes involving animal cruelty or neglect. Students seeking credit for school service requirements should speak with a RLR volunteer to discuss the program before proceeding.

The foster parent is responsible for transporting the animals to and from RLR or the veterinarian office chosen by RLR, for veterinary appointments, surgery, behavior evaluations, vaccinations, etc. The foster parent may also be responsible for transporting the animal to and from adoption events, and to off-site training classes, at RLR's discretion.

I have read and understand the statements above. I certify that all the information contained in this application is true and correct. I understand that although RLR takes reasonable care to screen animals for foster care placement, it makes no guarantees relating to the animals' health, behavior or actions. I agree to follow instructions provided to me by RLR volunteers to maintain the health and safety of foster animals in my care. I understand that I receive foster care animals at my own risk and can decline to accept any animal for which RLR has asked me to provide care. RLR will provide veterinary care to our foster animals if needed, however we ask that you work with your veterinarian for your own pets should they become ill. I acknowledge that RLR is not responsible for any property damage or personal injury suffered by me, members of my household, including my own animals, or any third parties during a foster placement, and I assume liability to provide adequate controls to prevent such damage or injury.

(Signature)	(Date)	
RLR Witness	(Date)	

Email Foster with Intent Application To: rufflifeadoptions@gmail.com