

Doberman Rescue of Rockdale, INC Adoption Application

Carole Rushing – Owner

cruzmine@comcast.net

This questionnaire is for your benefit as well as ours. The information you provide will enable us to better determine exactly what you are looking for in a Doberman, and if in fact a Doberman is the right breed for you, and which Doberman will fit best into your lifestyle. Please be honest in your response and we will be honest in ours. If we do not feel you can provide a proper home for a Doberman, we will tell you why we feel that way. Dobermans are not for everyone. **Remember, that this is a lifetime commitment. If you doubt that you can make such a commitment, please stop here.** Do not put one of our Dobermans through the trauma of being rejected from yet another home.

Name _____	Age _____	Home Phone _____
Work Phone _____		
Physical Address _____	City _____	State ____ Zip _____
Mailing Address (if different) _____		
Email Address _____		
What is your occupation? _____ Where do you currently work? _____		
For how long? _____		
Name Of Dog _____		
<u>Please complete the following information on anyone else that lives in the home where the Doberman will be living.</u>		
Spouse/Partner: _____	Phone: _____	Work: _____
Occupation: _____	Age: _____	

CHILDREN:

Name: _____ Age: _____

Name: _____ Age: _____

Please list anyone additional that lives in the home:

Do you currently have other dogs? _____ If yes, Breed: _____ Age: _____ Male
Female

Other Pets? Explain:

Have your current or past pets have outside training? _____

Would you consider continued professional training for you new Doberman? _____

What type of collar(s) do you feel are acceptable for training? _____ Everyday use?

What kind of leash? _____

What would you correct your animal for - and how would you do it? _____

What questions would you like to ask about this dog? _____

Do you rent or own your home? _____ How long have you lived at this address? _____

If you rent, name and phone number of landlord _____

Do you have a fenced yard? _____ Type & height of fence _____

If you have no fence, how will the dog be exercised? _____

Do you have an outdoor kennel? ___ Size _____ Are your gates padlocked? _____

Are you willing to allow a volunteer to visit your home by appointment? _____

Would you ever consider moving somewhere that does not allow your Doberman? _____

Are there regular visitors to your home, human or animal, with which your new dog must get along? _____

If yes, please describe: _____

If you were to marry or date someone who did not like your dog, what would you do? _____

Have you ever had a dog for a brief period of time that did not work out? _____

If yes, please explain the circumstances and what happened to it : _____

Do you foresee any major lifestyle changes in the next 15 years such as marriage, child birth, divorce, going away to college, health problems due to age, etc.? _____

If yes, please explain: _____

Does anyone in your household have any serious health problems? _____

If yes, please explain: _____

Does anyone in your household have allergies? _____ If yes, what kind? _____

Does anyone in your household smoke? _____

How many dogs have you owned in the past 5 years? _____

If you do not still own the dog(s), what happened to them? _____

Have you ever given away any of your pets?__ Please explain: _____

Under what conditions to you feel it is ok to give up a pet? _____

Do you leave a small child with a pet (new or old) when you are not in the room? _____

Can you provide a permanent home for this dog for the next 10 – 15 years? _____ Have you owned a Doberman before? _____

Why did you choose this breed? _____

List plans for this dog: () Pet () Guard () Companion () Obedience () Search & Rescue () Therapy

Other: _____

Preferences: **Color:** ____ **Sex** ____ **Age** ____ **Size** ____ **Ears:** () Cropped () Natural **Tail:** () Docked () Natural

Although you have marked your preferences, which if any of these would you be willing to reconsider? _____

Are you looking for an indoor or an outdoor dog? _____ What percentage of time will the dog spend outdoors? _____

Where will the dog be kept when you are not at home? _____

How many hours a day on average will the dog be alone? _____

Do you allow play time for your animals? _____

When you are home, where will the dog be kept? _____

Where would the dog sleep? _____

Do you allow animals on your furniture? _____

Who will be responsible for the care and training of this dog? _____

Please describe the training you plan to provide: _____

What kind of food do you plan to feed and how often? _____

Have you ever dealt with a major behavior problem? _____

If yes, please describe the problem and how you dealt with it: _____

Do you agree to contact **Carole Rushing (Doberman Rescue of Rockdale, INC)** if for any reason you can no longer care for or keep the dog? _____

Provide the name, clinic name and phone number for your veterinarian: _____

What do you expect to spend on yearly health care? _____

Were/are your past/current pets spayed or neutered? _____

If no, why not? _____

Who do you consult if your animal is not eating? Has Diarrhea? Acts Lethargic or becomes irritable? Vomiting?

Do you know how to give your animal medications? _____

Is your current dog, or was your past dog kept current on heartworm preventative? _____

If so, which product do you use and how often? _____

What do you use to control fleas and ticks? _____

What immunizations will you provide for your dog, and how often? _____

If your dog develops a serious medical problem what would you do? _____

If your dog became unable to control its urine later in life, what would you do? _____

Has a dog or puppy died on your premises within the last 6 months of distemper, parvo, or unknown causes?

If yes, please give details: _____

If you are unable to keep this dog for any reason, will you return it to us? _____

Personal reference (name, phone#, relationship): _____

Anything else you would like us to know about you? _____

To make your adoption easier -please consult us for advice on any problems

Please consult your Ga State licensed rescuer if any questions. Leave complete name and contact info.

Carole Rushing
Doberman Rescue of Rockdale, Inc
Non-profit No kill - Ga State Licensed Rescuer

(770) 929-1721
cruzmine@comcast.net

All of the information I have given above is true and complete. Any dog I may adopt will reside in my home as a pet. I will provide it with adequate food, water, shelter, training, affection and medical care.

I understand that Carole Rushing (Doberman Rescue of Rockdale, INC), or authorized agents are not responsible for the accuracy of information received about the temperament, habits and physical conditions of dogs available for adoption. I understand that it is my responsibility to see and evaluate the dog for myself before agreeing to adopt it. The Doberman Rescue of Rockdale, and any person associated with its adoption efforts, is in no way liable or responsible for any damage, accident or injury resulting from the placement of a dog into my household. I also understand that I will be required to sign an adoption contract to place a dog in my home. I am in full agreement with these terms of adoption. By my initial I acknowledge that I have read and understand this paragraph.

We reserve the right to refuse an applicant for any reason. Initial _____

Applicant's signature: _____

Date: ____/____/____

Co. Applicant 痾 Signature: _____

Date: ____/____/____