

Ghetto Rescue Adoption Form Page 1 of 7

Please fill out this form completely; failure to answer one or more questions may result in your application being rejected. Failure to disclose may result in your application being rejected. Completion of this application does not guarantee adoption of a dog. GRFF reserves the right to refuse any adoption to any applicant for any reason.

Name:	<input type="text"/>	
Address:	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
*You must live within six hours of the greater Los Angeles area in order to adopt from GRFF.		
Phone:	<input type="text"/>	
Email:	<input type="text"/>	
Driver's License #:	<input type="text"/>	
Today's Date:	<input type="text"/>	
Your Occupation:	<input type="text"/>	
Spouse's Name:	<input type="text"/>	
Spouse's Occupation:	<input type="text"/>	
Names / Ages of Children, If Any:	Name: <input type="text"/>	Age: <input type="text"/>
	Name: <input type="text"/>	Age: <input type="text"/>
	Name: <input type="text"/>	Age: <input type="text"/>
	Name: <input type="text"/>	Age: <input type="text"/>
	Name: <input type="text"/>	Age: <input type="text"/>
Any Other Occupants In Home? (List):	<input type="text"/>	
Name of Desired Dog:	<input type="text"/>	
Daytime Phone:	<input type="text"/>	
Evening Phone:	<input type="text"/>	
Cellphone:	<input type="text"/>	
Email Address:	<input type="text"/>	
Type of Dwelling:	<input type="checkbox"/> House	
	<input type="checkbox"/> Condo	
	<input type="checkbox"/> Apartment	
	<input type="checkbox"/> Other	
Do You:	<input type="checkbox"/> Rent	
	<input type="checkbox"/> Own	
If Renting:	I have my landlord's permission to have a dog	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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Landlord's Name:	<input type="text"/>	
Landlord's Phone:	<input type="text"/>	
What are your primary reasons for wanting a dog?	<input type="checkbox"/> Companion for myself	
	<input type="checkbox"/> Companion for other pet	
	<input type="checkbox"/> For my kids	
	<input type="checkbox"/> Gift	
	<input type="checkbox"/> Watchdog	
	<input type="checkbox"/> Other:	
If you have children, please describe their previous experience with other dogs:		
<input type="text"/>		
If your children did not want a dog, would you be interested in adopting one for yourself?		
<input type="checkbox"/> Yes		<input type="checkbox"/> No
Does any person in your household have allergies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes," please describe:		
<input type="text"/>		
Do you have a pet now?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes," how many?	<input type="text"/>	
If "yes," what types of pets?	<input type="text"/>	
If you have other dogs, list breed(s), age(s), and sex(s):		
Breed: <input type="text"/>	Age: <input type="text"/>	Sex: <input type="text"/>
Breed: <input type="text"/>	Age: <input type="text"/>	Sex: <input type="text"/>
Breed: <input type="text"/>	Age: <input type="text"/>	Sex: <input type="text"/>
Breed: <input type="text"/>	Age: <input type="text"/>	Sex: <input type="text"/>
Breed: <input type="text"/>	Age: <input type="text"/>	Sex: <input type="text"/>
If you have only one pet, has your pet ever had interactions with dogs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes," where was the interaction?	<input type="checkbox"/> Dog Park	<input type="checkbox"/> Friend's / relative's dog(s)

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Does your pet have any food defense or hoarding issues?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes," please explain:		
Are all of your pets spayed / neutered?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, which ones are not spayed / neutered?		
Have you ever had a female dog that had puppies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there anyone home during the day?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes," who?		
When will the dog be inside?		
When will the dog be outside?		
About how many hours will the dog be left alone on a daily basis?		
Where will the dog stay when he/she is home alone?		
Where will the dog sleep at night?	<input type="checkbox"/> Dog House	
	<input type="checkbox"/> Garage	
	<input type="checkbox"/> Inside House	
If inside the house, where, exactly?	<input type="checkbox"/> Kitchen	
	<input type="checkbox"/> Master Bedroom	
	<input type="checkbox"/> Spare Room	
	<input type="checkbox"/> Laundry Room	
	<input type="checkbox"/> Run of the House	
	<input type="checkbox"/> Other	
If other, or if you have additional comments on where the dog will sleep, please specify:		

What rooms are off limits to the dog?		
What outside areas are available to the dog?	<input type="checkbox"/> Fenced Yard	
	<input type="checkbox"/> Enclosed Patio	
	<input type="checkbox"/> Garage	
	<input type="checkbox"/> Dog House	
	<input type="checkbox"/> Unfenced Common Area	
	<input type="checkbox"/> Other	
Type of Fencing	<input type="text"/>	
Height of Fence (if any)	<input type="text"/>	
I have recently inspected my fence and it's in good condition	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The fence is intact on all sides and is at least 1 foot from the ground level in all areas	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I will inspect my fences thoroughly before the home visit and make necessary repairs for the safety and well-being of our new companion animal:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there are any gates?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How many gates?	<input type="text"/>	
Do you have an electric gate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How high?	<input type="text"/>	
Is there any type of lock on the gate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, type of lock?	<input type="text"/>	
If no locks, would you be willing to install them prior to placement, should this application be accepted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a pool?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, is the pool fenced?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Who has access to your yard?	<input type="checkbox"/> Gardener	
	<input type="checkbox"/> Pool Service	
	<input type="checkbox"/> Utility	
	<input type="checkbox"/> Neighbor	
	<input type="checkbox"/> Other	
Preferred level of exercise with dog:	<input type="text"/>	

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When you go on vacation, who will care for the dog?	<input type="text"/>	
Do you have a regular veterinarian?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, name of vet	<input type="text"/>	
Would you like a referral to a vet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Who will groom and bathe your dog?	<input type="text"/>	
Would your dog wear a collar?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, when?	<input type="text"/>	
Would you allow your dog to wear an I.D. tag?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How would you rate your level of dog owning experience?	<input type="text"/>	
How would you discipline your dog if he or she misbehaved?	<input type="text"/>	
How would you train this dog?	<input type="checkbox"/> Obedience Class	
	<input type="checkbox"/> Hit With Newspaper	
	<input type="checkbox"/> Firm Verbal Commands	
	<input type="checkbox"/> Clicker / Hand Signals	
	<input type="checkbox"/> Other	
If "other," please explain:		
<input type="text"/>		
How would you normally walk your dog?		
<input type="text"/>		
When your dog is on a leash do you normally use:	<input type="checkbox"/> Collar only	
	<input type="checkbox"/> Corrective collar	
	<input type="checkbox"/> Harness	
	<input type="checkbox"/> Other	
Are you willing to live with hair on the furniture, stains on your rugs, a warm body on your bed, and an animal that might be destructive at times?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, shelter, and exercise for your new pet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to make a long-term commitment to care for your pet for its entire life span, which could be as much as 10-20 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What would happen to your pets if you moved...		
Locally?	<input type="text"/>	
Out of state?	<input type="text"/>	
Out of the country?	<input type="text"/>	

Which of the following reasons might prompt you to give up your dog?	<input type="checkbox"/> Excessive Barking
	<input type="checkbox"/> Biting
	<input type="checkbox"/> Digging
	<input type="checkbox"/> Moving
	<input type="checkbox"/> Divorce
	<input type="checkbox"/> Poor watchdog
	<input type="checkbox"/> Destructive chewing
	<input type="checkbox"/> Financial problems
	<input type="checkbox"/> Occasional accidents indoors
	<input type="checkbox"/> Growling at guests
	<input type="checkbox"/> Excessive vet bills
	<input type="checkbox"/> Shedding
	<input type="checkbox"/> Allergies
	<input type="checkbox"/> New spouse/partner doesn't like dogs
	<input type="checkbox"/> Aggressive on leash
<input type="checkbox"/> None of the above	

Comments

Please list pets you have owned since you have been an adult and the length of ownership; if they are no longer with you, please provide an explanation.

How did you find out about our adoption program?	<input type="text"/>
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Why are you interested in adopting from a rescue?

Tell us why you're interested in this particular dog on application

Please read and initial each statement below

I understand that a home visit is required prior to final placement	<input type="text"/>
I understand that a home visit does not guarantee placement	<input type="text"/>
I understand that filling out this application does not guarantee an adoption and that GRFF reserves the right to refuse any adoption to any applicant for any reason	<input type="text"/>
Ability to make a donation does not qualify an applicant, as inability does not disqualify you either. *Grant opportunities available for part of adoption.	<input type="text"/>
I can pay the adoption fee. This fee helps rescue, feed, provide medical care for, spay / neuter, and place abandoned dogs.	<input type="text"/>
I understand that any donation or contribution is a gift freely given, not a purchase price for a dog	<input type="text"/>
I agree to provide my own collar, leash, corrective collar or harness, and a personal ID tag at the time of adoption	<input type="text"/>
I have answered all the questions on this adoption application with honesty and to the best of my ability	<input type="text"/>

Ghetto Rescue FFoundation reserves the right to refuse any adoption to any applicant for any reason. This questionnaire becomes part of our contract.