

## Adoption Application

The person or persons submitting this application will henceforth be known as the **ADOPTER**. The potential Rescue Boston Terrier will be known henceforth as the **BOSTON** or the **ADOPTED BOSTON**. The Rescue Group or Rescue Person where this adoption application is submitted will be known henceforth as **BOSTON TERRIER RESCUE of Florida Inc.** and the **ADOPTER** must take full responsibility to insure that arrangements are made with **BOSTON TERRIER RESCUE of Florida Inc.** if a situation arises where the **BOSTON** can no longer be cared for by the **ADOPTER** as stated below.

### CONTACT INFORMATION

Name: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Ph - Day: \_\_\_\_\_ Ph - Eve: \_\_\_\_\_ Best Time To Call: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### ADOPTION INFORMATION

How long have you been at your present address?: \_\_\_\_\_ Do you own or rent?: \_\_\_\_\_

\* Renters must attach a copy of your lease or notarized statement from your landlord stating that a pet of this size is permitted.

If you move, what will you do with your adopted Rescue?: \_\_\_\_\_

Occupation: \_\_\_\_\_

Where will the pet be kept during the day?: \_\_\_\_\_

Where will the pet be kept at night?: \_\_\_\_\_

Where will the pet be kept when no one is at home?: \_\_\_\_\_

How long will the pet be left alone each day?: \_\_\_\_\_

How many adults live in your household?: \_\_\_\_\_ What are their ages?: \_\_\_\_\_

How many children?: \_\_\_\_\_ What are their ages?: \_\_\_\_\_ Will there be children visiting?: \_\_\_\_\_

Who will be responsible for caring for this animal?: \_\_\_\_\_

### Exercise and elimination will be: (Check all that apply)

In Exercise Pen or Run?: \_\_\_\_\_ On Lead?: \_\_\_\_\_ On Chain or Trolley?: \_\_\_\_\_

Totally Enclosed Fenced Yard?: \_\_\_\_\_ Partially Fenced Area?: \_\_\_\_\_ Electronic/Radio Fence?: \_\_\_\_\_

Loose in Unfenced Yard?: \_\_\_\_\_ Indoor Area (Papers, etc.)?: \_\_\_\_\_

Please list all pets you currently own or have owned in the past five years: (If none, include pets owned during your adult life)

#1. Type: \_\_\_\_\_ (Dog, Cat, Breed)

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Spayed/Neutered?: \_\_\_\_\_ Where is it Now?: \_\_\_\_\_

#2. Type: \_\_\_\_\_ (Dog, Cat, Breed)

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Spayed/Neutered?: \_\_\_\_\_ Where is it Now?: \_\_\_\_\_

#3. Type: \_\_\_\_\_ (Dog, Cat, Breed)

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Spayed/Neutered?: \_\_\_\_\_ Where is it Now?: \_\_\_\_\_

If you have ever had a pet lost or die at an early age or because of an accident, please give details:

Have you ever given a pet up?: \_\_\_\_\_ If yes, please explain the circumstances: \_\_\_\_\_

How much do you expect to spend on this animal each year?: \_\_\_\_\_

(Include food, vet care, boarding, licensing, grooming, etc)

Do you prefer a Male or Female?: \_\_\_\_\_ Does the sex of the rescue matter?: \_\_\_\_\_

Desired Age?: \_\_\_\_\_ Would you consider a dog more than 3 years of age?: \_\_\_\_\_

More than 6 years of age?: \_\_\_\_\_ More than 10 years of age?: \_\_\_\_\_

Will you consider a dog that is not housebroken?: \_\_\_\_\_ Has health problems?: \_\_\_\_\_

Is appearance or size important?: \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Do you agree to return this dog to Boston Terrier Rescue if you are unable to keep it for any reason?: \_\_\_\_\_

### REFERENCE INFORMATION

Name and phone of Veterinarian: \_\_\_\_\_

Please list two other references we may contact regarding this adoption:

#1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Best Time to Call?: \_\_\_\_\_

#2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Best Time to Call?: \_\_\_\_\_

### THE RECIPIENT BOSTON TERRIER RESCUE GROUP OR PERSON RESERVES THE RIGHT TO REFUSE ANY APPLICATION

By filling, signing and submitting I/We certify that all of the information on this application is true and complete. I/We understand that if selected as an adoptive home I/We will comply with the following conditions of adoption:

- I. ADOPTER shall keep ADOPTED BOSTON as an indoor pet and will provide BOSTON with identification at all times (i.e., collar tag, tattoo, or microchip). BOSTON will be kept under control at all times when off ADOPTER'S property.
- II. ADOPTER shall provide adequate veterinary care for BOSTON, including annual vaccinations, rabies vaccinations as needed, and any other care recommended by BOSTON'S veterinarian. ADOPTER will take BOSTON to the veterinarian if ill. If ADOPTER is unable to do so, ADOPTER will notify BOSTON TERRIER RESCUE contact.
- III. ADOPTER agrees to notify BOSTON TERRIER RESCUE contact of any change of address or telephone number of ADOPTER.
- IV. If BOSTON is lost or stolen, ADOPTER will immediately notify BOSTON TERRIER RESCUE contact.
- V. ADOPTER shall return BOSTON to BOSTON TERRIER RESCUE if, under any circumstances, ADOPTER is no longer able to keep or provide for BOSTON. ADOPTER shall not sell, give or otherwise transfer or convey BOSTON to anyone other than BOSTON TERRIER RESCUE .

Signature of Applicants Residing in Household

Date

#1. \_\_\_\_\_

\_\_\_\_\_

#2. \_\_\_\_\_

\_\_\_\_\_

#3. \_\_\_\_\_