

***Is Today My Day? Rescue  
Adoption Application***

**How do we contact you?**

Name:					
Street address:					
City:		State:		Zip Code:	
Phone Number:				Best time to reach you	
Email:					

**About you and your dog?**

***"I don't know" is a fine answer to any of the questions below. If you don't know, we'll give you the answer.***

How many hours a day is your pup going to be alone?		
Is this your first dog as an adult?	Circle one:	YES                      NO
What kind of dog food do you or will you use?		
What is your strategy for housetraining?		
If you use a crate, how many hours a day will your pup be crated?		
Where will your pup sleep at night?		
How do you tell your pup <b>no</b> to chewing, biting and other things that pups do?		
Do you have a fenced yard for your dog? Circle one:    YES                      NO	If yes, what kind of fence?	
If you are in the country and your dog will not be fenced, how close are you to roads and highways?		
<b>How will your dog be housed and cared for when you are gone during the day.</b>		
Run of the house?	Circle one:	YES                      NO
Tied outside?	Circle one:	YES                      NO
In yard with dog house?	Circle one:	YES                      NO
In crate?	Circle one:	YES                      NO
	If yes, how many hours?	
Do you have a dog door?	Circle one:	YES                      NO
How do you plan on exercising your new dog?		
How will your dog be cared for when you are out of town?		

Does anyone smoke inside your home?    Circle one:    YES                      NO

**Tell us about yourself:**

Occupation		Employed by	
Work phone:		Work hours	
Name of others in household/ Spouse			
Occupation		Employed by	
Work phone:		Work hours	
Are there children in your home or who will be a part of your dog's life?    YES    NO			
If so, what are their ages:			
Is acquiring a new dog a family decision?    YES    NO			
Should your current family/home situation change, will the dog be a part of that change?    YES    NO			
Do you own or rent your home?    OWN    RENT			
What will this dog's life be like in your home?			

**References**

Current Vet		Clinic name:	
City/State:		Phone number:	
Additional reference:		Phone number:	

**Tell us about your other pets:** List the **dogs** and **cats** that you have or had in the last 5 years:

Pet's name:	sex / age / breed	Spayed / Neutered	Still have? If not, why?

Have you ever adopted a pet from a Shelter or Rescue Group in the past?    YES    NO	If yes, please name the organization:	
Have you ever released an animal to any shelter?    YES    NO	If yes, please explain	

The following are conditions of adoption. Your signature constitutes your agreement to the requests below. If you can't agree to any of the below conditions of adoption, please explain below.

**If I adopt this pup, I agree to: (place check mark in box if you agree)**

- Return the dog to **Is Today My Day Rescue** if this placement doesn't work for me.
- Allow a dog rescue staff person to visit my home to see how my dog is doing.
- Not put this pup on a line, chain or tether.
- Provide quality dog food for my pup.
- Provide preventative care and veterinary care for my dog – required vaccinations, heartworm preventative, .

Signed (if email – just type in your signature) \_\_\_\_\_ Date \_\_\_\_\_