



DOG ADOPTION APPLICATION

I.D. # _____
 Breed: _____
 Name: _____
 Age: _____
 Sex: _____

Adopting a dog is a long term commitment. Please complete this form to help us determine whether the dog you have chosen is suitable for your family and lifestyle.

NAME (FIRST & LAST):		HOME PHONE:
ADDRESS:		MOBILE PHONE:
CITY:	PROVINCE:	E-MAIL
POSTAL CODE:	DATE:	SIGNATURE:

1. Please check reason for adopting: Pet Watchdog Breeding Hunting Child's Playmate
2. Are you adopting for: Yourself Immediate Family Other
3. Are you Under 18 19-29 30-60 61-75 75+
4. Do you live in: House Apartment Condo Townhouse
5. Do you own or rent? Own Rent
6. If you live in an apartment, on which floor? _____
7. How long have you lived at your present address: _____
8. How many people live at your home? _____
9. Please list the ages of any children: _____
10. Is any member of your family allergic to dogs? Yes No Unknown
11. Please list any other pets in your home: _____
12. Are your other pets vaccinated? Yes No
13. Are your pets spayed/neutered? Yes No
14. Is there someone home during the day? Yes No
15. Have you any experience in housebreaking a dog? Yes No
16. Will the dog be kept in Home Yard Both
17. Do you have a fenced yard? Yes No
18. Will the dog be tied up? Yes No
19. Have you ever had a dog before? Yes No
20. If yes, what became of the dog? _____
21. Have you ever adopted an animal from LAWS? Yes No
22. Name of your Veterinarian: _____
23. What brought you to LAWS? _____
24. If this dog becomes ill or injured, are you prepared to be financially responsible for it? Yes No

LAWS RESERVES THE RIGHT TO REFUSE AN ADOPTION