

VIVA PERROS ADOPTION APPLICATION

In order to be considered as an adopter from you must:

- Be 21 years of age or older.
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet for the entire life of that animal.
- Have the knowledge and consent of your landlord.
- Have the knowledge and consent of all adults living in household.
- Understand that children's age restriction will be based on their exposure to and experience with this specific breed.
- Understand that we have the right to either deny or approve your adoption application without explanation.
- If there is ever a reason that you cannot keep the dog you adopted from us, we will take her back.

Thank you for taking the time to fill out our adoption application. The purpose of this application is to learn a little about your family and home so that our organization can make the best possible match for both you and our rescue animal. Our main concern is placing our animals in a compatible home with a family that will give them a LIFETIME commitment of love and proper care. Please be aware that while completing this application does not bind you to adopt one of our animals. The application may take you time to complete, but your future dog could be with you for years to come, so the commitment up front on finding a great match is a fraction of the time the animal will be with you.

ADOPTION APPLICATION

Date:

Name or type of dog seeking:

Reason for selecting this particular dog or breed:

Applicant Name:

Current Address:

City:

State:

Zip:

Email Address:

Home Phone #:

Work Phone #:

Cell Phone #:

Name and ages of all household members, **including yourself**:

Name	Age	Relationship to Applicant

Occupation of applicant(s):

Do any members of your household have pet-related allergies?

Who will be caring for the pet?

Describe your **current** pets (Name, breed/type, age, sex):

Name	Breed	Age	Sex	How long with family
------	-------	-----	-----	----------------------

Veterinarian's Name:

Veterinarian's Phone Number:

Are your pets spayed/neutered? ____Yes / ____No

If not, what is the reason(s)?

Are your pets up to date on vaccinations and heartworm preventative? ____Yes / ____No

How many hours will your pet(s) be alone during the day?

Where will the dog be kept during this time?

Is this in a different location from where your current pets are kept?

When I am home, my dog will be kept mainly:

Where will the dog sleep at night?

Have you had any other pets in your adult life? If yes, how long did you own them and what happened to them?

Name	Breed	Age when last with family	Year when last with family	What happened to them

Do you have a fenced yard?

What kind of fence material?

Height?

Are any repairs necessary to the fence to keep a small dog from escaping?

How long have you lived at your current address?

Type of Housing (home, condo, aptmt., mobile home, RV, ranch):

___ I rent ___ I own ___ I have other arrangements:

Please explain any restrictions Manager has with pets:

Are you planning on moving in the near future?

If you move, what would you do with your pet?

Do you travel frequently? If so, what do you plan to do with your pet while you're away?

I want a pet because:

Who will be responsible for the socialization, medical care, and training of this animal?

Excluding your death, what circumstances would cause you to give up an animal?

What is the best telephone number to reach you?

Any additional comments or things we did not ask that you would like us to know?

Thank you for taking the time to answer our questions. If you have any comments regarding this adoption application or our adoption process, please feel free to let us know as we are always looking for ways to improve. Again, thank you for saving a life by considering a rescued pet.

Steps After Completing Application

- Please send your adoption application in one of these ways:

Email to leverage1114@gmail.com

or mail to Kim Galusha, 6800 West Gate Blvd, #132-55, Austin, Texas 78745

I, the undersigned, do hereby certify that the information above is truthful and correct.

Signature

Date