

Miniature Schnauzers & Friends Rescue

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Redondo Beach, CA 90278
www.msfr.org
info@msfr.org

Adoption Application

Dog Interested in: _____

Today's Date: _____

Pet ownership is a serious responsibility. The policy of this adoption group is to assure that each person who adopts a pet is aware of the responsibility, and that each is capable and willing and ready to accept that responsibility morally, physically, emotionally and financially. It is quite true that not everyone who desires to own a pet should have a pet.

The following questionnaire has been designed to aid both you and the adoption group in deciding if you and/or your family is indeed at this moment adequately prepared to assume the type of responsible ownership which we are endeavoring to assure for our adoption animals.

Please be sure to answer all questions and feel free to add your own comments. If a question does not apply write N/A.

Your Name: _____ Your Age: _____

Phone: _____ Alternate Phone: _____

Email: _____

Name of spouse/significant other/roommate: _____

Address: _____ City: _____ Zip: _____

Your Occupation: _____ Spouse Occupation: _____

If this relationship were to change, with whom would the dog remain?: _____

Do all adults in your household want to adopt a dog? (Yes/No) _____

Who will be primarily responsible for the dogs care? _____

What are your reasons for adopting a dog? A companion for you _____ Your cat/dog _____

Spouse _____ Children _____ Gift (for who?) _____ Other _____

Your type of Dwelling (house,apartment,condo,mobile) _____ Own or Rent _____

If you rent, are dogs allowed? (Yes/No) _____ Length of residency _____

Can you provide proof that your residency would allow a new dog? (Yes/No) _____

Does your residency have restrictions on breed, size or number of animals? _____

In your selection of a dog what is your preference? Breed _____

Age _____ Long/Short Hair _____ Sex _____ Temperament _____

This dog will be: Indoor only _____ Mostly Indoor _____ Mostly Outside _____

Outdoors only _____ Other _____

If you answered indoor only, please describe what outdoor access the pet will have

(when will it go out, etc.) _____

If you have children that live or stay with you, please list their ages: _____

Please list any other adults household members: _____

Have your children ever been around dogs? (Yes/No) _____

Do your current pets like dogs? (Yes/No) _____

Have you ever bred a dog? (Yes No) _____

If yes,did you breed for: Fun _____ Show _____ Profit _____ Accidentally happened _____

LIST PETS YOU CURRENTLY OWN:

Type/Breed	Age	Spayed/Neutered?(Y/N)	Kept Inside or Out	Last Vaccination Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

LIST PAST PET HISTORY (pets you had since you were an adult and no longer own):

Type/Breed	Age	Spayed/Neutered? (Yes/No)	Kept Inside or Out	When did you own this pet and what happened to it?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

In regards to the above questions, what happened to your pet(s)? (check all applicable)

Hit by car _____ Old Age _____ Died of disease _____ Gave Away _____ Gave to Shelter _____

(Explain) _____

Other _____

What outside space is available for the dog? Fenced yard (Y/N) _____ Height _____

Type of Fencing? Chain Link _____ Block Wall _____ Wood _____

Other _____ Locks on gates? _____

Other provided living areas: Garage _____ Balcony _____ Unfenced yard _____

Kennel Run _____ Other _____

Do you have a: Balcony _____ Pool _____ If yes, is pool secured or separately fenced? _____ Pet door _____

Will you have your dog tied up? _____

Where will your dog sleep during the night: _____

In what areas of the house will the dog be allowed? _____

How many hours per day on average will the dog be left alone? (check one)

0-4 _____ 4-6 _____ 6-8 _____ 8-10 _____ 10-12 _____ over 12 _____ other _____

Do you have a relative who would adopt the pet if you, for any reason, become incapable of caring for him or her? (Note: MSFR reserves the right to approve this individual)

Yes or No, if yes who? _____

Please provide name, address and phone number: _____

Who is your current or last veterinarian (clinic name, address, phone): _____

Will your dog be allowed on the furniture? (Yes/No) _____

If not, how will you train your dog not to jump on your furniture? _____

Would you allow an inspection of your home/yard? (Yes/No) _____

How do you plan on housebreaking your new dog? _____
(please understand that even dogs that are housebroken will go through an adjustment period)

Are there any reasons that might preclude you from being able to properly care for your new pet?

If yes, please list reasons: _____

Under what conditions would you not keep your new dog? (check all that apply)

Move to a place that didn't allow your new dog _____ Move out of state _____

Too much hair _____ Dog grew too big _____ Chewing _____ Barking _____

Digging _____ Housebreaking problem _____ Kids ignored pet _____

New baby _____ Allergy _____ Pets didn't get along _____

Destructive Behavior _____ Family Changes/New Relationships _____

Expensive Vet Bills _____ Other _____

If your dog develops behavioral problems, what would you do? _____

If you have a family changes such as a new baby how would you integrate your new dog? _____

What would you do with your dog if you could not keep it for some reason? _____

Do you travel a great deal? (Yes/No) _____

Where will your pet stay when you are on vacation? _____

Have you ever trained a dog in obedience class? (Yes/No) _____

Will you be able to live with fur on your furniture, stains on your rugs, a warm body on your bed, and an animal who may be destructive at times? (Yes/No) _____

How did you hear about this pet adoption?

Internet _____ Friend _____ PETCO _____ Other _____

ADOPTIONS MAY REQUIRE A HOME CHECK FOR THE SAFETY OF THE PET. IN THE EVENT THAT MY APPLICATION IS ACCEPTED, I AGREE AND CONSENT TO HAVE A VOLUNTEER VISIT MY HOME AT A MUTUALLY AGREED UPON TIME. I ALSO GIVE CONSENT TO MINIATURE SCHNAUZERS AND FRIENDS RESCUE TO CONTACT MY CURRENT OR PAST VETERINARY.

I UNDERSTAND THAT SHOULD I BE ACCEPTED TO ADOPT THIS PET THAT THIS APPLICATION BECOMES PART OF THE ADOPTION CONTRACT.

YES/NO _____

Signature: _____ Date: _____

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS APPLICATION.

PLEASE NOTE: Filling out this application DOES NOT guarantee an adoption. We have thoroughly evaluated all of the animals in our care, and try very hard to match the right dog to the right person and situation. Adoptions are not on a first come first serve basis. We reserve the right not to adopt.

If we do not call or email you within 3-4 days of receiving your application, it means that either:

1. The dog was adopted another applicant, or
2. We felt that the situation presented on the application was not the right situation for that particular dog.