



Loxahatchee Animal Rescue Community, Inc.

Application to Adopt

Your answers to these questions help us determine the best homes for our rescue animals and the best rescue animal for your family. By applying for the adoption of a L.A.R.C. animal, you hereby give your Veterinarian(s) and other references permission to disclose information to the appropriate representative conducting the application process. Incomplete applications will not be accepted.

Knowingly providing false information on this application results in automatic dismissal of the application and no further action will be taken towards the adoption of any animal from our rescue organization.

Applicant #1

Name: _____ Date: _____

Phone: _____ Email: _____

Address: _____

City/State/Zip: _____

Occupation: _____ Employer: _____

Work Phone: _____ Work Email: _____

Applicant #2

Name: _____ Date: _____

Phone: _____ Email: _____

Address: _____

City/State/Zip: _____

Occupation: _____ Employer: _____

Work Phone: _____ Work Email: _____

Personal Reference #1

Name: _____ Years Acquainted: _____

Phone: _____ Email: _____

Address: _____

City/State/Zip: _____

Personal Reference #2

Name: _____ Years Acquainted: _____

Phone: _____ Email: _____

Address: _____

City/State/Zip: _____

1.) Do you live in house, apartment, trailer, or other? If other, please explain below.

2.) Do you own or rent? (Rescue requires a copy of Landlord statement/Lease agreement for renters) Rent Own

3.) Does your homeowners/renters policy prohibit you from owning/housing certain breeds of dogs? Yes No

4.) Does your state/county/township/municipality have any laws regulating the breed, type, number of dogs you may own? Yes No

5.) Do you have a fenced in yard? Yes No

6.) Kennel Run? Yes No

7.) Describe fencing/kennel below. If no, how will exercise/toilet be handled?

8.) How many adults in the home: _____

9.) How many children in the home: _____ Their age range: _____

10.) Are there any family members who need any special consideration for any reason? Please explain below.

11.) Do you own any other dogs? How many?

12.) Are they fixed? Yes No

13.) Breed/Sex/Age of other dogs:

14.) Any other pets/livestock? Please list what animals and how many.

15.) Who is your current veterinarian? (This question must be answered)

Name:

Office:

Phone:

Email:

Address:

City/State/Zip:

16.) List any pets you have/had listed at this vet:

17.) List the name/phone of any veterinarians, groomers, trainers you have used in the past:

18.) How many dogs have you owned in the past 5 years? What happened them?

19.) Which dog/puppy are you interested in and why?

20.) What are your plans for this dog? Pet Guard Hunting Obedience Other:

21.) What sex would you like? Female Male Doesn't Matter

22.) Do you have a color preference? If yes, please describe.

23.) Your age preference: Under 1 Year 1 to 3 Years 3 to 5 Years Over 5 Years

24.) Would you consider a dog with special needs? (Deaf, blind, chronic medical problems) Yes No Maybe

25.) Would you consider more than one dog? Yes No Maybe

26.) Where will the dog spend most of each day?

27.) Where will the dog sleep?

28.) How many hours will the dog be alone each day?

29.) What are your thoughts on obedience training?

30.) What are your thoughts on crate training?

31.) Further comments to help us find the right rescue dog for you, including more preferences on type of dog you are looking for:

DO YOU AGREE TO THE FOLLOWING:

Provide adequate food, water, and shelter for the dog at all times? Yes No

Keep the dog inside primarily, not tied, chained, or locked outside? Yes No

Keep current license and ID tags on tag at all times? Yes No

Provide timely health care for the dog? Yes No

Restrain dog in open vehicle? (i.e. back of a pick up truck) Yes No

Return dog to rescue if you can no longer care for the dog? Yes No

Allow Rescue agent to visit your home both before and after adoption? Yes No

Keep dog current on all vaccines, including rabies? Yes No

Administer heartworm and flea/tick preventative all year round? Yes No

Signature Waiver (Only if application is filled out online)

A.) I agree by initialing _____ that by typing my name is in the same as signing my name to this legal document.

B.) I give permission for the Rescue Agent to type my name to this document, causing it to be the same as my legal signature on this document. _____ (Applicant's initials)

FINANCIAL AND PHYSICAL

I hereby testify that I am financially and physically able to care for this dog. I understand that proper food, veterinary care, bedding, toys, crate, and so on can be costly and I am able to meet these requirements. I further testify that I am physically fit to provide all necessary activities with my dog. _____ (Applicant's initials)

TRUTHFULNESS

I understand that if the information contained herein is found to be false, my application can, and will be refused or said adopted animal shall be relinquished to the Rescue without a refund of the Adoption Fee. _____ (Applicant's initials)

ADOPTION FEE STATEMENT

I understand that the adoption fee donation is nonrefundable. _____ (Applicant's initials)

Adopter Signature: _____

Date: _____

Witness Signature: _____

Date: _____

FOR RESCUE USE ONLY

Date application received by rescue agent: _____

Comments:

APPROVED / NOT APPROVED

Rescue Representative Signature: _____

Date: _____



Loxahatchee Animal Rescue Community (L.A.R.C.)

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www.facebook.com/loxanimalrescuecomm

www.facebook.com/pawsitivedirectionprogram