

Dog Adoption/Foster Application

"Pet ownership is a major responsibility and one that should not be taken lightly. Cinderella Pet Rescue, Inc. (CPR) makes an ongoing effort to find the best possible homes for the animals. We ask that you take the time to fill out this application and be prepared to spend time discussing it with one of our adoption representatives before the adoption is completed."

In order to be considered for an adoption, or to foster an animal, you must: Be 18 years of age * Be willing and able to provide loving attention, medical care, and lifetime stability for a pet. * Have the knowledge and consent of all adults living in your household * Have a valid ID with current address * Have landlord's name and telephone number (or lease) * Understand that Cinderella Pet Rescue, Inc. must approve your application (based on the policies set by the board of directors.) You must also agree to be fully responsible for the pet while in your care and understand that CPR makes no claims nor warrants the health or behavior of any animals made available for foster or adoption. Because the history of most animals offered by rescue organizations is often vague, CPR cannot guarantee the health or behavior of any pet. As such, all persons fostering or adopting a pet must hold harmless CPR, all staff, volunteers, affiliated organizations or companies, from any and all claims now or in the future. By signing this pet adoption/foster application you are agreeing to hold harmless and release from liability CPR, all CPR staff, volunteers, veterinarians, facility landlord and all affiliated organizations or adopting a pet from fostering or adopting a pet from CPR.

Procedure: * Completely fill out & sign application. Pay donation/adoption fee. * If your application is approved, a home visit will be scheduled. * If the adoption is approved, an adoption agreement will be completed, and you may keep your new pet. * If the adoption is not approved the adoption fee will be refunded.

Today's Date:	Location:	Applying to	Foster	Adopt
Name of Dog(s) applying fo	ſ	Breed/Type		
Where you heard about CPF	R, Inc. (if newspaper, which on	e)?		
Please print identification	information clearly, especial	ly email address:		
Applicant(s) Name:				
Address				
City	State	_Zip		
Place of Employment		Since	(mo/yr)	
E-mail Address:	Cell I	Phone ()		
Home Phone ()	Work	(

1. What type of dog would you like to have? MALE - FEMALE ADULT - PUPPY
□Extra large/over 80 lbs. □60-80 lbs. □40 to 60 lbs. □20-40 lbs. □10-20 lbs. □Under 10 lbs.
2. Please list any preferences (age, sex, breed)
□Lap pet □ Active/energetic □ Shy □Affectionate □Quiet □Playful □Independent
□Gentle □Mellow □Protective □Intelligent □Other:
3. My new pet must be able to get along with: □Dogs □Cats □Children □Farm Animals
□Other:
4. Do you have an application pending for a pet with another organization?noyes
5. Have you ever had an application declined for adoption of an animal from an animal welfare
group/animal control facility?noyes Explain:
6. Are you willing to take the time to housebreak a pet, and do you understand that changing a pet's
environment may cause the pet to have accidents? yesno
7. If a behavioral problem arises, what steps will you take to work on it?
9 Dees any member of the household have any allergies to enimols?
8. Does any member of the household have any allergies to animals?yesno
Explain
9. For whom are you adopting the pet?self giftother family member
10. How many people live in your home?
11. If there are children list: number of boys & ages
number of girls & ages
12. Who will be responsible for feeding and taking the pet outside?
13. Will you take obedience training if needed?
14. What kinds of animals have you owned?
15. Describe those pets you <u>currently</u> own: (If you have more animals than space provided, please use
back of this page or an additional sheet of paper and attach to this form.)
a. Name Type:DogCat Breed/Size:
Age Sex Spayed/Neutered?yesno Primarily Indoor or Outdoor?
When & how did you get the animal?
b. Name Type:DogCat Breed/Size:
Age Sex Spayed/Neutered?yesno Primarily Indoor or Outdoor?
When & how did you get the animal?

16. Describe all pets you no longer have, bu	at previously owned in the last 10 years: (If you have had
more animals than space provided, please i	use an additional sheet of paper and attach to this form.)
a. Name Type	:DogCat Breed/Size:
Age Sex Spayed/Neutere	d?yesno Primarily Indoor or Outdoor?
When & how did you get the animal?	
Year you last had pet: Why you n	o longer have pet?
Cause of death, or where pet is now:	
b. Name Type	:DogCat Breed/Size:
	d?yesno Primarily Indoor or Outdoor?
When & how did you get the animal?	
Year you last had pet: Why you n	o longer have pet?
17. List each vet/animal hospital where you	r animal(s) received care during the last 10 years:
If several vets were used, please explain . Ij page or an additional sheet of paper and at	f the space provided is insufficient, please use the back of this tach to this form.
-Name of vet or clinic:	Phone number: ()
What owner name(s) are records listed under	er
-Name of vet or clinic:	Phone number: ()
What owner name(s) are records listed under	er
18. Name of vet you will use for your new p	pet:
19. What type of home do you live in?h	ousetownhouseduplexcondoaptmobile
20. Do you own or rent your residence?	_ownrent
21. If you rent: Landlord name	Landlord phone #()
What type/size pets are allowed?	
If you have rented your current residence for landlord contact phone number:	or under a year, please provide prior address and prior
Prior address	
Prior Landlord's name:	Landlord phone #:
	outdoor onlyindoor/outdoorindoor only
	s -If yes, what type of fence?
How tall? (Give range of heights, if applicable)	Any holes or gaps?yes no
Does the fence belong to you, or to neighbo	ors? Is it attached to the home?yesno
24. How often will you exercise the pet and	l for approximately how long?

25.	When	you	are	home,	where	will	the	pet	be ke	pt?	

26. Where will the pet sleep?

27. How many hours will the pet be left unattended (i.e., workday)?_____

28. When no one is home (i.e. at work, shopping), where will the pet stay (be specific)?

29. How often do you travel?_____

30. What will you do with the pet when you travel?

31. If you move, what will you do with the pet? ______

32. Are you or your spouse with the military? ____yes ____no

33. Are you aware CPR, Inc. requires all dogs/cats in a home be spayed/neutered? ____yes ____no

34. Are you aware of the adoption fee? yes no

35. Are you familiar with your local animal control laws? ____yes ____no

36. Have **all adult** family members met with, and agreed upon, the pet?_____

37. Has anyone in your family, or person living in your home, surrendered/relinquished a pet to an animal

shelter or humane society? _____yes _____no If yes, please explain:______

38. Has any person residing in the home where the pet is to live ever been accused of, or convicted of, a crime involving cruelty to, or neglect of, an animal? yes no If yes, explain:

I have read the above information carefully and have filled out this application honestly. I understand that falsification or omission of information and/or failure to answer all questions and sign the application can result in this application being declined. Also, if an omission or untruth is discovered after an adoption takes place, I understand that Cinderella Pet Rescue, Inc. (CPR) reserves the right to annul the adoption and reclaim the animal. I give CPR permission to fully investigate the information provided as well as contact veterinarians and related officials. If the application passes this review, I agree to a home and yard visit on a mutually agreed date by a CPR volunteer before an adoption can be further considered for approval.

In addition, I understand the adoption decision is dependent on many factors, including, but not limited to, the compatibility of the family and home to the individual animal, and other applications received on this animal. I understand it is the prerogative of CPR to decide which home is most appropriate and that their decision is final, and as such I will not argue with the decision. Unless otherwise indicated by CPR, I am free to apply and undergo the application process in the future.

Signature(s)	Date
Printed Full Name(s)	
Driver's License Number:	