



Hay River SPCA Dog Application Form

Date _____

Canine Adoption Application for _____

Age _____ Sex _____

APPLICANT'S INFORMATION

Name _____

Address _____ City _____ Postal Code _____

Phone (Home) _____ (Alt Phone) _____ Email _____

Age of Applicant: Under 18 18 - 24 25-34 35-44 45 and older

QUESTIONS:

DOG

1) Why do you want to adopt a dog? Please check all that apply.

- Pet & Companion Breeding Hunting Dog Watchdog
 Gift Guard Dog For a Senior For a Child
 Other (Please Specify) _____

2) Who will be the dog's primary caretaker? _____

3) How much daily exercise can you give your dog? _____

4) Approximately how much do you think your dog will cost per year? Vet \$ _____ Food \$ _____ Boarding \$ _____

5) How much do you think it costs to spay or neuter a dog? Spay \$ _____ Neuter \$ _____

6) How often do you think you should vaccinate? _____

7) How much time do you expect to spend training your dog in the first few months? _____

8) What have you done to prepare for a new dog? (Research? Books? Internet?) Please specify _____

9) What kind of energy level are you looking for in a dog? High Medium Low

10) What kind of type/temperament are you looking for in a dog? Please check all that apply.

- Outdoor Dog Highly Trainable Bold & Aggressive
 Indoor Dog Well Trained Already Prefer House Trained
 Lap Dog Athletic Must Be House Trained
 Enjoys Walking on Leash Requires Little/No Exercise Quiet
 Exercises in Yard Enjoys Swimming Aloof
 Enjoys Walking off Leash Enjoys Playing with Other Dogs Enjoys Jogging
 Enjoys Playing Fetch Requires Lots of Exercise Exercises on a Tie-Out

11) What do you think is the average lifespan of a dog? _____ years

12) Please check your desired physical characteristics of future dog?

- A) Sex Male Female No Preference
B) Coat Short Medium Long No Preference
C) Age Puppy Adult Senior No Preference

Do you have a preference for a breed/type/colour? If so, please specify: _____

13) It is the policy of the Hay River SPCA to spay/neuter all pets. Are you willing to spay/neuter the dog if not already done? Yes No

14) Please indicate the importance of the following with respects to a new dog:

	Very Important	Important	Not Important
Friendly with children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendly with other dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendly with cats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendly with visitors to the home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enjoy being groomed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enjoy being held	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enjoy being petted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Calm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Active	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quiet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FAMILY

1) Number of adults (18 or over) at home? _____ Ages _____

2) Number of children at home? _____ Ages _____

3) Any pet allergies in your family? Yes No Not sure

Please give further details if you answered Yes or Not Sure: _____

4) If you are away from home for an extended period, where will your dog stay? At home with care Boarding Other

If Other, please state where: _____

5) How long will your dog be alone during the day? Weekdays _____ Weekend _____

6) What would you do with your dog if you moved and/or changed jobs? _____

7) Do you currently have other dogs? Yes No If yes, how many? _____

Please give ages, sex & breed _____

Have they ever lived with another dog? Yes No Not Known

8) Have you had dogs before? Yes No If yes, please specify

NAME	SEX	AGE	YR OF DEATH	CAUSE OF DEATH or IF STILL LIVING WHERE NOW?

9) Have you ever adopted a pet from the Hay River SPCA or another organization? Yes No When? _____

If yes, please give details: _____

10) Re: your past or current dogs, are/were they: Indoors only Outdoors only In/Out

11) Re: your past dogs, are/were they spayed or neutered? Yes No If no, please give reason: _____

12) Do you have other pets? Yes No How many? _____ Cats _____ Birds _____ Other _____

13) Do you have a veterinarian? Yes Name: _____ No (If No, we can assist you in getting one)

14) Under what conditions would you give up a dog? Please any that apply.

- I would not consider giving up a dog Moving Too Costly New Baby Aggression Sick Dog
 Not enough time Allergies Change of Job Behavioral problems Other _____

YOUR HOME

- 1) Do you own or rent your home? Own Rent
- 2) If you rent your home, do you have your landlord's permission to have a dog? Yes No If Yes, provide a letter from your landlord
- 3) Where will the dog be kept during the day?
 Loose in the home Tied outside Garage Loose outside Crate Kennel run With me
 Other: _____
- 4) Where will the dog stay during the night?
 Loose in the home Tied outside Garage Loose outside Crate Kennel run With me
 Other: _____

Names and telephone numbers of 3 adults (who do not live with you) we can contact for references. No family members please.

- 1) _____
2) _____
3) _____

Is there anything else you would like to tell us to support your application?

All of the information I have given above is true and complete. The dog will reside in my home as a lifetime companion. I will provide him/her with adequate food, water, shelter, training, affection and regular vet visits. If the dog I wish to adopt is not spayed or neutered, I agree to have this done within 4 months of the adoption.

I give permission to Hay River SPCA to verify any information that I have given on this application. I understand that this application must be approved by the Hay River SPCA Adoption Committee, and full payment must be received before I take possession of any dog. If for some reason this agreement is cancelled by me within one week, I am entitled to a full refund.

I am in full agreement with the above terms of adoption. The Hay River SPCA is in no way liable or responsible for any damage, accident or injury resulting from the placement to a dog into my household.

Applicant Signature: _____ Date: _____

Thank you for completing this application.
This information will help us match you with the right dog for your family.

It can take up to 7 days for your application to be processed and we ask for your patience during this time.