



Tilted Acres Rescue and Adoptions
P.O. Box 711
Raeford, NC 28376
910-875-5791

Name of dog you want to adopt _____

Dog Adoption Application

Name _____ Home Phone _____
Address _____ Work Phone _____
City _____ State _____ Zip _____ Cell Phone _____
E-Mail Address (s) _____

Personal References: (if possible please list one relative not living with you)

1) Name _____ Phone _____ Relationship _____
2) Name _____ Phone _____ Relationship _____

To ensure that this adoption is in the best interest of both you and the dog you selected, we ask that you answer the following questions:

- 1) Do you live in (select one): House _____ Apartment _____ Condo/Town home _____ Trailer _____ Military Housing _____
- 2) Do you: Own _____ Rent/Lease _____ Name of Complex & Office Phone # _____
- 3) Are you planning to move in the next six months? Yes _____ No _____ If so what will happen to this dog if you move unexpectedly? _____
- 4) What will happen to this dog when you go on vacation or in case of an emergency? _____
- 5) How many hours during the average day will your dog be without a human? _____
- 6) Where will this dog be kept during the day? _____
Night? _____ When you're not home? _____
- 7) Does your home have a dog door? Yes _____ No _____
- 8) Do you have a fenced-in back yard? Yes _____ No _____
- 9) Does your gate have a lock? Yes _____ No _____ If not could one be put on? _____
- 10) If there is no fenced yard how will you exercise the dog? _____
- 11) Please tell us why you would like to adopt a dog? _____
- 12) I am adopting this dog for (check all that apply): myself _____ spouse _____ children _____ gift _____ other _____
- 13) How many people will your dog will be living with (including yourself): _____
- 14) Did your entire family agree on the adoption of this one dog? Yes _____ No _____
- 15) Will the whole family share in the care of this dog? Yes _____ No _____
- 16) Is there any member of your household who is allergic to dogs? Yes _____ No _____
- 17) Are there any children that visit your home frequently? Yes _____ No _____ If yes, ages: _____
- 18) Are there any regular visitors to your home, human or animal, with which your new dog must get along?
Yes _____ No _____ If Yes, Describe: _____
- 19) Do you have any other pets living with you now? Yes _____ No _____ If Yes, please list below:
Type (dog, cat, etc.) Breed Neutered/ Owned for how long? Spayed? _____

20) Have you had pets in the past? Yes _____ No _____ If Yes, please list below:
Type (dog, cat, etc.) Breed Neutered/ Owned for Where is the pet now? Spayed? How long? _____

21) Do you have a regular veterinarian? Yes _____ No _____
22) Veterinarians name and phone _____
23) What kind of behavior do you find unacceptable? _____

24) If the dog has problems with behavior what will you do about it? _____
25) Have you ever given a dog up in the past? _____ Why? _____

I certify that the above information is true and understand that false information may result in nullifying this adoption.

Applicant's Signature _____ Date _____