

Marley's Pit Stop Rescue
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ADOPTION QUESTIONNAIRE

As only 1 out of every 10 puppies born ends up in a forever home, our rescue focuses in part on communicating the responsibilities of pet guardianship, including a capability, willingness and acceptance of the moral, physical and financial responsibilities that go along with adding any family member.

By completing this questionnaire, you will aid us in understanding that you and your family are indeed ready for pet guardianship, and whether the dog of your interest would be a good match for you and your lifestyle.

DOG(S) OF INTEREST: _____

PERSONAL INFORMATION

Name: _____	Age: _____
Name of spouse: _____	Age: _____
Street address: _____	
City: _____	State: _____ Zip: _____
Home phone: _____	Work: _____ Cellular: _____
E-mail: _____	Driver's license # _____
Occupation: _____	Spouse's occupation: _____
Work schedule: _____	Spouse's: _____
Names of all persons living in your household, their relationship to you and their ages:	

Please list two personal references and their relationship to you:	
Name: _____	Relationship: _____ Phone: _____
Name: _____	Relationship: _____ Phone: _____

Over Please

YOUR HOME

Type of dwelling?
 House Apt Condo Other _____ Own or Rent
 Does your home have a pool? Yes No
 Would you object to an inspection of your home by a rescue volunteer? Yes No
 If not a home owner, do you have the landlord's permission to have a dog? _____
 Landlord's name: _____ Phone: _____
 Does your Home Owners Insurance, HOA or Landlord have breed restrictions? Yes No
 Home Owners Insurance Carrier: _____

YOUR PETS

Current Pet(s)

Cat, Dog (Breed)	Age	Sex	Spay/Neutered ?	How & Why Obtained?	How Long

Previous Dog(s)

Breed of Dog	Age	Sex	Spay/Neutered ?	Kept In or Out	What Happened?

Have any of your dogs ever had puppies? Yes No
 If Yes, you breed for: Fun Profit Show Accident

Has any member of your family ever experienced animal-related allergies? Yes No

Have you ever trained a dog in obedience classes? Yes No

Have you ever trained a dog at home to: Sit Down Come Stay Guard Attack
 Other _____

Your Family Veterinarian:

Name: _____ Phone: _____

Over Please . . .

YOUR NEW DOG

Who would be responsible for the care of the dog? _____

What is your primary reason for adopting a dog?

Companion ___ Guard dog ___ Fighting ___ Hunting ___ Attack dog ___ Other ___

If Companion, whose? You ___ Spouse ___ Children ___ Other pet ___

Exactly where would the dog sleep? Inside (where? _____) Outside (where? _____)

What rooms would be off limit to your pooch? _____

Will Pooch be allowed on furniture? _____

How many hours per day would the dog be left alone? _____

Where would the dog be left when he/she is alone? ___ Indoors ___ Outdoors

If outdoors: Yard ___ Patio ___ Kennel ___ Garage ___ Other ___

If yard: Fenced ___ (___ feet) Unfenced ___ Do you have a doggie door? Yes ___ No ___

Who has access to your backyard? _____

Do you intend to hire a dog-sitter or take the dog to a doggie daycare center? Yes ___ No ___

When you are at home, the dog would be:

always indoors ___ mostly indoors ___ always outdoors ___ mostly outdoors ___

If the dog will be outside at all, what outside space is available for the dog: _____

Yard ___ Patio ___ Run ___ Balcony ___ Unfenced yard ___ Other: _____

How do you plan to handle dog's exercise needs? _____

Do you feel obedience training makes a dog a better companion? Yes ___ No ___

Would you be willing to attend obedience classes at your own expense? Yes ___ No ___

Have you ever housetrained a dog? If so, How? _____

Do you travel a great deal? Yes ___ No ___

How often? _____ How long at a time? _____

When you do travel, how do you intend to provide for the dog while you are gone? _____

What provisions would be made for the dog if you had to move to:

Locally? _____ Out of state? _____

To a place where no pets are allowed? _____

Please Circle below the circumstances under which you would not keep the dog?

Divorce	Illness in family	Moving	New baby
New job	Chewing	Housetraining problem	Chewing
Barking	Digging	Allergy	Destructive
Shedding	Dog grew too big	Dog became ill	Financial
Pets didn't get along		Not obedient enough	

Other (please explain) _____

Would not give up for any of the above _____

If the dog became destructive at your home what would you do? _____

Over Please . . .

Your new companion may live 15+ years, what would you do with your dog if you could no longer care for the dog? _____

Are you willing to live with hair on furniture, stains on rugs, a warm body in bed, and an animal that may be destructive at times?? _____

Pets are an investment of time & money. Are you willing to financially commit to the medical care, grooming, proper diet, shelter and exercise needs for a pet? _____

Is there anything else you would like to tell us about yourself? _____

PLEASE READ AND INITIAL EACH STATEMENT BELOW:

- I understand that a home visit is required prior to placement _____
- I understand that a home check does not guarantee placement _____
- I understand that any donation or contribution is a gift given in support of Marley's Pit Stop Rescue (MPSR), not the purchase price of a dog. I will make a minimum tax deductible donation of \$350 to help MPSR provide medical care, spay & neuter, boarding in support of our continuing rescue efforts of unwanted, abused & neglected dogs _____
- I understand that if applying for a dogs in *Foster Care*, the Foster Parent may exercise their privilege to adopt _____
- I understand my little dog may want to follow me around _____
- I am familiar with the characteristics and temperament of this breed _____
- I am prepared to pay someone up to \$50, or more, every 4-6 wks to groom your pet _____
- Adopters over the age of 70 are required to have a co-adopter in case of accident or death. If this applies to you, I will provide co-adopter? (must be present at time of adoption) _____
- MPSR any of its representatives, reserve the right to refuse adoption to any applicant for any reason _____



Application Information: All of the information I have provided in this application is true and correct. If any of the information changes, I will advise you promptly.

Signature: _____ Date: _____

Print Name: _____