

Save Our Spots Dalmatian Rescue, Inc.

8226 N. 67th Street, Brown Deer, WI 53223

(414)365-2679 (voice mail and fax)

Email: sosdalrescue@earthlink.net

Website: www.sosdalrescue.com

SOS ADOPTION APPLICATION

Why would you like to adopt a Dalmatian?

Have you ever owned a Dalmatian? Yes No If no, how did you learned about Dals?

Type of Dalmatian You are Looking For

Sex: Male Female No Preference

Color: Black Spots Liver Spots No Preference

Age Range: Up to 1 yr. 1yr -3 yrs

3yrs-5yrs 5 yrs and older No Preference

How long are you willing to wait for the best match? _____ months

PERSONAL INFORMATION

Primary Adopter _____ Date of Birth _____

Secondary Adopter _____ Date of Birth _____

Address _____

City _____ State _____ Zip Code _____ Home Phone _____

Primary Adopter Occupation _____ Work Phone _____

Secondary Adopter Occupation _____ Work Phone _____

Email Address _____

How long at present address _____ Do you own rent

If you rent, landlord name and number

Do you live in a/an Apartment House Condo Townhouse

How many people reside in your home? _____ Adults _____ Children

Ages of Children _____

Names of children _____

Does anyone in your home have allergies? __Yes __No If yes, who _____

HOME ENVIRONMENT

Do you have a COMPLETELY fenced-in yard? __Yes __No

If Yes: Height of Fence _____

Type of Fence _____

If No or if not completely fenced-in, how will you contain your dog to your property? (Be specific)

Primary Adopter Work Hours _____

Secondary Adopter Work Hours _____

How many hours per day do you expect the dog to be left alone? _____

Where will you keep the dog when no one is home? _____

Where will you keep the dog during the night when you are sleeping? _____

What will you do with the dog when you need to travel for personal or business reasons? _____

If you move in the future, what will you do with your dog? _____

PET EXPERIENCE

List current animals that you own:

Type/Breed _____ Age _____ Sex _____ Neutered/Spayed/Intact

Dominant or Submissive _____

Behavior with other dogs _____

Type/Breed _____ Age _____ Sex _____ Neutered/Spayed/Intact

Dominant or Submissive _____

Behavior with other dogs _____

Type/Breed _____ Age _____ Sex _____ Neutered/Spayed/Intact

Dominant or Submissive _____

Behavior with other dogs _____

Veterinarian for current or prior dogs:

Name _____

City _____ State _____

Phone (____) _____

If you do not currently own a dog, have you owned one before in your adult life?

Yes No

If Yes:

Type/Breed _____ Neutered/Spayed/Intact _____

What happened to him/her? _____

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What happened to him/her? _____

Are you willing to obtain a crate/kennel and crate train the dog if necessary?

Yes No

Are you willing to enroll the dog in obedience training classes?

Yes No

If yes, name of facility if you have one picked out:

If no, what are your plans for training the dog: (be specific)

How do you plan on exercising the dog?

If you never have owned a dog in your adult life, please list two references:

Name: _____

Phone # _____ Relationship _____

Name: _____

Phone # _____ Relationship _____

MISCELLANEOUS

Rescued animals need time to adjust to a new home. Are you willing to give this dog adequate time to adjust to ensure proper adjustment-at least three weeks in some cases? Yes No

If no, how long do you feel is a fair amount of time to adjust? _____

What would be unacceptable behavior in your home for you to want to give up the dog?

How did you hear about SOS Dalmatian Rescue? (please check all that apply)

Internet Family/Friend Word of Mouth Newspaper Ad

Vet's Office Groomer/Trainer Flyer Posted at a Store Shelter

I/We understand that in order to complete processing of this application, a visit to my home and verification of veterinary care of existing pets is required. This will be scheduled and conducted by a representative of the SOS organization, and that by submitting this application, I agree to such a scheduled visit and give permission for my veterinarian to release said information.

SOS adoption fee is \$200. All our Dalmatians are spayed or neutered, had dentals and nail trim if needed, are up to date with rabies, bordetella, and distemper vaccines, are dewormed, microchipped, heartworm tested and on monthly preventative.

I/We acknowledge that all the information contained on this form is true and correct. I/We understand that any misrepresentation of fact may result in the removal of the adopted dog from my home by SOS Dalmatian Rescue, Inc.

Primary Adopter's Signature

Date _____

Secondary Adopter's Signature

Date _____

FOR OFFICE USE ONLY

Date recd _____ H.V. Date _____

Approved Yes No Approved w/ conditions Yes No

(rev 03/06)