

20. Are you willing to housetrain?
21. Where will your dog be kept during the day?
22. Where will your dog sleep?
23. Are you interested in crate training?
24. How long will your dog be left alone during the day?
25. Have you owned dogs in the last 10 years and if so, please explain a little about them.
26. What type of personality do you find desirable in a dog. (Playful,cuddly, quiet,spunky,protective,active,couch potato, etc)

27. Are you willing to take a dog that is:
- | | | |
|-----------------------------------|------------|-----------|
| Not reliable with children? | <i>yes</i> | <i>no</i> |
| Physically handicapped? | <i>yes</i> | <i>no</i> |
| Requires ongoing medication? | <i>yes</i> | <i>no</i> |
| Requires continued housetraining? | <i>yes</i> | <i>no</i> |
| May have been abused? | <i>yes</i> | <i>no</i> |

28. Are you willing to adopt a bonded pair? *yes* *no*
29. Do you currently own pets? *yes* *no*

30. Please list current pets:

Pets Name	Pets Name	Pets Name	Pets Name
Breed	Breed	Breed	Breed
Gender	Gender	Gender	Gender
Fixed?	Fixed?	Fixed?	Fixed?
Age	Age	Age	Age
Year's Owned	Years owned	Years owned	Years owned
Kept in or out?	Kept in or out?	Kept in or out?	Kept in or out?
Bred?	Bred?	Bred?	Bred?

31. Are your pets current on Vaccinations? *yes* *no*
32. Are your pets current on Heartworm Preventative? *yes* *no*
33. What type of Heartworm Preventative are they on? _____
34. Will your pets accept a new animal into the household? *yes* *no*
35. Please list your Vet's information here:

36. Please provide 3 references:

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NAME	PHONE NUMBER	RELATIONSHIP	TIME KNOWN

By completing this application and signing below, I certify that I am at least 21 years of age and will assume all responsibility for the care and well being for the animal that I am adopting through *Florida Underdog Rescue of Florida*.

I further agree that I will be contractually bound through adoption to:

- Take my dog to a vet at least once a year for an annual exam, shots, and heartworm check.
- Take my dog to a vet in a timely manner if ill.
- Maintain proper care including monthly heartworm preventative and flea/tick treatments.
- Return my dog to *Underdog Rescue of Florida* and ONLY *Underdog Rescue of Florida* if for ANY reason if I can no longer care for the dog in a loving and humane manner.

Please note that we must be given notice of 3 weeks to arrange to take a dog back.

Signature: _____ Date: _____

Printed Name: _____

Please fax to:

TO BE FILLED OUT BY UNDERDOG RESCUE OF FLORIDA REPRESENTATIVE

Date received: _____

Comments: _____
