

Tattered Tails Animal Rescue, Inc. - (610) 573-3457 - TTARescue15@gmail.com - WWW.TTARescue.com

Shannon Eichner: President - Charles Eichner: Vice President

Heather Davis: Secretary/Managing Director – Shannon Kuzma: Foster Coordinator – Sharon Eichner: Treasurer

## **Canine Adoption Application**

In order to be considered as a guardian you must first be at least 18 years of age, have a valid state-issued photo ID showing your current address and have verifiable consent from your landlord. In an effort to assure more satisfactory guardianship, we ask your cooperation in the completion of this application. Just as there are guidelines for the adoption of a child, there are guidelines for the placement of animals. Although **TTAR** eagerly seeks the prompt placement of our animal residents, experience has shown that some situations are not consistent with the welfare of the animal. Unsatisfactory placements can result in an unpleasant experience for your family and many times can traumatize the pet. We reserve the right to refuse any placement we consider unsatisfactory. This is not a reflection on you personally, but simply that a particular pet may not do well in your situation. We feel our experience in this area must be our guide to a successful adoption.

Personal Information:				
Name:	Date:			
Driver's License/ID Number:				
Address:	City,State,Zip:			
Home Phone:	Cell:			
Email:	Number of Adults Number of Children & Age			
Veterinarian:	Phone Number:			
Two Personal References—Non Fa	amily Member that you have known at least 1 year			
Name: Phone Number:	Relationship to Applicant: How long have you known this reference?			
Name: Phone Number:	Relationship to Applicant: How long have you known this reference?			
Household Information:				
De verrière in ex. 🗖 Herres . 🗖 America	ent   Mobile home ame & number):			





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Current Pet Information	<u>n</u>					
List all current and previou	s pets (last 5 yrs	):				
Type of Animal	<u>Age</u>	Sex (M/F)	Neutered (Y/N)	Still in household (Y/N)		
-						
<u> </u>	<u> </u>					
Pets Vaccinations Current:	: □ Yes □ No	)				
General Information						
Have you ever surrendered	d, returned, lost,	or given up any pre	evious pet?   Yes, If y	yes, why? □ No		
It can take a dog 2 weeks	or more to settle	in a new environme	ent. Are you willing to g	give it time to adjust? ☐ Yes ☐ No		
			Relations	ship to applicant?		
Why do you want this dog?	? lifatima a	ammitment to sere	for/keep this dog on a	acompanion not? U Vac. U No.		
Are you prepared/able to make a lifetime commitment to care for/keep this dog as a companion pet?   Yes  No Are you able and willing to pay for pet expenses including vet care, supplies, pet-sitting, training, etc.?  Yes  No Where will the dog be kept when you are home?  Not home?						
Where will the dog sleep a	t night?					
Our dogs may not be fully he	ouse broken. Are	you willing to provide	de consistent house train	ning? □ Yes □ No		
Are you familiar with house	e training proced	ures? ☐ Yes ☐ I	No.			
How long do you think hou	ise training will ta	ake?				
How often and what types	of exercise will y	our dog receive? _				
How do you plan to train th						
Are you familiar with Positi						
Are you familiar with Treat		s ⊔ No				
How will you address beha		he destructive if not	t properly socialized tr	ained, or played with? ☐ Yes ☐ No		
List the types of behavioral				amed, or played with: 11 res 11 No		
In what circumstances wou	ıld you give up y	our dog? (ex. unab	le to house train, chew	ring, moving, etc)		
• •	• `	•	•	t address, and written permission		
•			• •	e right to contact individuals and		
erify all information, includ	ling conducting	a home visit and	vet check.			
o the best of my knowled	ge, the informat	tion provided is co	omplete and accurate	e. I understand that if reference or		
et checks do not correspo	and with the info	ormation provided	, my application may	be declined.		
pplicant's signature:			Da	nte:		
ignature of Volunteer: _						

