

Furry Friends of the Foothills  
Pet Rescue, Inc  
P.O. Box 850  
Yadkinville, NC 27055  
[ffinc@triad.rr.com](mailto:ffinc@triad.rr.com)  
[www.furryfriendsofthefoothills.qti](http://www.furryfriendsofthefoothills.qti)



Date & Time: \_\_\_\_\_

### FURRY FRIENDS DOG ADOPTION APPLICATION

Dog's Name: \_\_\_\_\_

Dog's ID#: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

E-Mail Address (Please write clearly): \_\_\_\_\_

Place Of Employment: \_\_\_\_\_

Drivers License/State ID number: \_\_\_\_\_

Do you live in a: House    Apartment    Trailer    Town Home

Do you: Own    Rent

If you rent what is your landlord's name and phone number? \_\_\_\_\_

Are you in the process of moving, or anticipate moving in the next few months? Y    N

Do you live with your parents? Y    N    Are you 18 years of age or older? Y    N

How did you hear about us? Newspaper    Television    [www.furryfriendsofthefoothills.org](http://www.furryfriendsofthefoothills.org)    Facebook  
Twitter    Friend/Family Member    Petfinder.com    Winston Salem Craigslist    Offsite location  
[please specify location] \_\_\_\_\_ Other \_\_\_\_\_

Why are you choosing to adopt from the Furry Friends of the Foothills? \_\_\_\_\_

What other places have you visited when looking for a pet? Pet Store    Newspaper    Other shelter (s)

Please specify where \_\_\_\_\_

### **ADOPTION INFORMATION**

What is your past and/or current experience with dogs? \_\_\_\_\_

1<sup>ST</sup> time owner    Have had 1 or 2 dogs as an adult    Have had more than 3 dogs as an adult

Had a dog as a child    Experienced in resolving behavior issues    Frequently care for friends' dog(s) Y    N

What kind of characteristics are you looking for in a dog/puppy? Why are you adopting an animal? \_\_\_\_\_

Have you adopted from the Furry Friends of the Foothills before? Y    N    If yes, where is the pet now? \_\_\_\_\_

What activities do you want to do with your dog/puppy? \_\_\_\_\_

Who will care for this dog primarily (feeding, playtime, walks, vet visits)? \_\_\_\_\_

Have you ever surrendered or given away any pet to an animal welfare group, private rescue or individual person? Y    N

If so, please explain the circumstance:  
\_\_\_\_\_  
\_\_\_\_\_

What are some reasons you would relinquish this dog back to the Furry Friends of the Foothills, e.g. human aggression, animal aggression, housetraining problems, excessive chewing, separation anxiety, moving, having a baby, cannot afford any longer, etc.?

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### **PREVIOUS AND CURRENT PET INFORMATION**

Have you ever had a pet: Run away    Get hit by a car    Die in your care    Kept as an outdoor pet

If so, please explain: \_\_\_\_\_

Have you ever: Given/sold an animal to a family member    Given/sold an animal to other person    Given an animal to a rescue or other animal welfare society (please list the organization(s))? \_\_\_\_\_

If so, why? \_\_\_\_\_

**What pets do you currently have or have had in the past THREE years in your household?**

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Are your pets current on vaccinations (within the last year)? Y    N    Were previous pets taken to the vet annually? Y    N

Are your pets spayed/neutered? Y    N    Were previous pets spayed/neutered? Y    N    If no, Please explain why? \_\_\_\_\_

Who is your veterinarian? \_\_\_\_\_

Please provide their address and phone number: \_\_\_\_\_

Would the records be under another name other than the one provided on the front of this application? \_\_\_\_\_

If so, please provide the full name: \_\_\_\_\_

Do you have other veterinarians that may have records for your current or past pets? Y    N    If so, please provide their name, address and contact information: \_\_\_\_\_

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### **HOUSEHOLD INFORMATION**

**Please list the names and ages of all people living in the home and their relationship to you**

**(Spouse/Partner/Roommate/Daughter)?** *Failure to fully disclose this information will result in immediate adoption denial.*

Name and Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

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Name and Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name and Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Do children (not in the immediate family) ever visit your home? Y    N    If so, how often: \_\_\_\_\_

Age(s) of the children: \_\_\_\_\_

Does anyone in the household have allergies to any kind of animals? Y    N    If YES, have they consulted with their doctor about getting an animal? Y    N    If YES, are they taking medication? Y    N

Are you In the process of moving, or anticipate moving in the next few months? Yes    No

If you ever move, have you considered that another place may not allow pets? What will you do if this happens?

How would you describe your household? Active Noisy Quiet Average

Do you have a fenced in yard? Y N If yes, describe the area and the fence: \_\_\_\_\_

**NEW PET INFORMATION**

***Please understand that it may take a new dog 2 weeks or more to adjust to a new home and/or to other pets and visitors.***

Where will you keep this dog? (Check ALL that apply) Free run of house Crate in house Inside Dog  
Outside Dog Inside/Outside dog In Garage Yard with a fence Basement  
Other (Please explain) \_\_\_\_\_  
Where will the dog be kept during the day? \_\_\_\_\_ At night? \_\_\_\_\_  
How many hours will it spend alone? \_\_\_\_\_  
Where will it be kept when its alone? \_\_\_\_\_  
Would you consider using a crate to confine your new dog? Y N How long will the dog possibly be crated daily? \_\_\_\_\_  
Why do you want a dog? (Check ALL That apply) House Pet Guard Dog Breeding Companionship  
Travel Companion Gift for friend or relative Other (Please explain) \_\_\_\_\_

**I certify that I have read this questionnaire and that all information I have given is true and accurate, and that I understand that any falsification may result in the nullification of an adoption.**

\_\_\_\_\_  
**Signature Printed Name Date**

**PLEASE REMEMBER: We get NO COUNTY, STATE OR FEDERAL FUNDING. We operate solely on DONATIONS and ADOPTION'S!**

Note: You must be present to be approved for adoption! We do accept applications by e-mail or postal mail.

\*\*If you submit this application by e-mail you must sign once present at FFF Inc.\*\*

\*\*\*To e-mail this application simply Save it to your documents and then attach it to e-mail To: [ffinc@triad.rr.com](mailto:ffinc@triad.rr.com)\*\*\*

**\*\*\*Furry Friends of the Foothills reserves the right to deny any adoptions\*\*\***

**NOTES (for staff use only):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR OFFICE STAFF ONLY (please initial and date)**

Adoption Counselor(s): \_\_\_\_\_  
DNA Check \_\_\_\_\_ Home ownership/Landlord Approval \_\_\_\_\_ Vet Check \_\_\_\_\_ ID Check \_\_\_\_\_  
Family Verification \_\_\_\_\_ Meet & Greet \_\_\_\_\_ Read behavior evaluation \_\_\_\_\_ Read all relevant previous history  
from memopad \_\_\_\_\_ Printed and reviewed health records \_\_\_\_\_ Dog License \_\_\_\_\_ Microchip Check \_\_\_\_\_  
Areas of emphasis that were counseled for this pet: Indoor/Outdoor concerns \_\_\_\_\_ Vet concerns \_\_\_\_\_ Crating \_\_\_\_\_ Kid  
restrictions \_\_\_\_\_ Animal Restrictions \_\_\_\_\_ Work schedule \_\_\_\_\_ Pet's activity level/exercise needs \_\_\_\_\_ Medical  
conditions \_\_\_\_\_ Other \_\_\_\_\_