

BASSET RESCUE CREW OF THE SOUTHEAST

Adoption Application

Thank you for considering a rescued basset from BaRCSE, Inc. A successful adoption depends on the selection of the right dog for your household and your understanding of the responsibility taken when you adopt a rescued dog. So that we may assist you with making this important decision, please answer the following questions as completely as possible.

Your Name: _____

Co-Applicants Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone numbers including area codes: Home: _____

Cell: _____ Work: _____

Email Address: _____

Number of adults in the household: _____ Number of children: _____ Ages: _____

Has everyone in the household agreed to take on the responsibility of a pet: _____

Does anyone in the household have any pet allergies? _____

Explain: _____

Type of dwelling do you live in? (i.e. house, condo, apt, farm, mobile home): _____

Do you own or rent? _____ How long have you lived here? _____

If you rent, has the landlord provided written permission for you to have a dog? _____

Is there a size/weight limitation on allowable dogs? _____ If yes, limit is _____

Landlord's name _____ Phone (include area code) _____

Do you have a securely fenced in area? _____ If yes, what type of fencing? _____

Height _____ Approximate size of fenced area _____

If no, what arrangements will you have for the basset's exercise and toilet duties? _____

Do you have a doggie door installed in your home? _____

Will this be your first pet? _____ What pets did you previously own? _____

What happened to them? _____

Do you presently have any other animals? _____

If yes, please list. Include name, breed, age, sex, and how long you've owned each pet.

1. _____

2. _____

3. _____

Are your pets spayed/neutered? _____ Next due date of all shots (rabies, DHLPP, etc)? _____

Are your pets on heartworm preventative? _____ Next due date? _____

Your veterinarian's name _____ Clinic name _____
 Address _____ Phone (include area code) _____
 Name on account _____
 Why do you want a rescue basset? _____
 Have you had bassets before? _____ How many now? _____ How many in past? _____
 How do you plan to care for, train and exercise the rescue dog? _____
 Where will your rescue dog be kept during the day? _____ Night? _____
 How many hours a day will your animal(s) be alone on a regular basis? _____
 Where will the rescued basset sleep at night? _____
 Do you have an age preference? Puppy _____ Young _____ Adult _____ Senior _____ None _____
 What gender would you prefer? Male _____ Female _____ No Preference _____
 Would you consider adopting a bonded pair of bassets? _____
 Are you willing to house train the dog, if necessary? _____
 Would you consider a special needs basset? _____
 If yes, what type of special needs? Vision problems _____ Hearing problems _____
 Special medical and/or medication needs (i.e.: daily medications) _____
 Are you familiar with crate training? _____ Are you willing to crate if necessary? _____
 Will you have the entire household present during the pre-adoption home visit? _____
 Do you have a pool, hot tub, pond? _____ If yes, is there a fence around it? _____
 How did you hear about BaRCSE? _____

 All of the information I/we have provided on this application is, to the best of my knowledge, true and complete. I understand that falsifying information on this application, or at any time during the application process will disqualify me from adopting a basset. I am aware that submitting my application does not guarantee that I will receive approval to adopt a basset from BaRCSE. I also understand that by submitting this application, I give BaRCSE, Inc. permission to access my veterinary records.

Signature of adult applicant(s) _____ Date _____
 _____ Date _____

Mail application to: BaRCSE, Inc Attn. Adoption Director P.O. Box 2273, Columbia, SC 29202 or email: adoption@barcse.org. If mailing application, include a check with \$10 adoption application donation, made out to BaRCSE. If emailing application, check may be mailed or submitted via Paypal to barcsemail@gmail.com. You will be contacted by telephone in 7-10 days after we receive your application. Once approved, you will be asked to sign an adoption agreement with BaRCSE.

For Office use: Application received _____ Vet records OK _____ references OK _____
 Home visit: Date _____ by _____
 Adoption approved: Date _____ by _____