Cochise Canine Rescue

PO Box 87 – Pomerene AZ 85627

Jeff Robbins and Sybil Erden -- Rescue coordinators

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Adoption Application

This agreement is between Cochise Canine Rescue (hereafter referred to as CCR) and
(Your name) (hereinafter referred to as Applicant.)
Applicant is interested in the Dog (name)(breed) approximate ageyearsmonths.
The Applicant allows CCR or CCR's representative to call or write the below references including Veterinarians, landlords et al in order to confirm the validity of the statements made below.
Name of Applicant(s):
Address: City, State Zip:
Phone #s:
Own? Rent? If renting, name & phone # of Landlord
(If renting you will need a letter approving the keeping of a dog.)
Where will the dog sleep?
Hours the dog will be alone (without human supervision) during the day: Where will the dog be when alone?
I have do not have a fenced yard.
Height and construction of fencing
I do do not have a swimming pool.
If yes, it has does not have fencing appropriate to keep this dog out of the pool.

Number of people in home	Ages of Children:
Other pets/animals in home:	Ages:
If you had to move, where would your a	animals go?
If you have to travel on business/vacation for them?	on where will your animals go or who will care
Your Veterinarian:Name:	Phone #
Employer: Company & supervisor's nar	me
Phone #exte	ention:
How long:yearsmonths Po	osition:
2 non-related Personal references:	
Reference #1 Name	phone #:
Reference #2 Name	phone #:
I understand that dogs/puppies can be dwith them to insure their future proper by	estructive and am willing to train them and work behavior.
returned to CCR or a person/rescue s	n no longer keep this dog, that s/he MUST be selected by the CCR. The dog(s) MAY NOT go ends up in a shelter, fees equaling the cost of
• • •	is true and complete to the best of my knowledge e in my family have never been arrested for any ghting or cock fighting:
Signature:	Date:
Signature:	Date: