

**A PASSION FOR PAWS**



**AKITA RESCUE**

**A PASSION FOR PAWS RESCUE, INC.**

501(c) (3) non-profit

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**ADOPTION APPLICATION**

Date

**Personal Information**

Full Name(s)

Address

City/State/Zip

Home Phone Number

Cell Phone Number

Email

Drivers' License # Number

Employer's Name

Employer's phone number

**About the Dog You Wish to Adopt**

Dog's Name

What is your idea of an ideal dog and why?

Desired age:

Desired Size:

Desired Gender:  Spayed Female  Neutered Male  No Preference

Willing to adopt:  dog that needs training  outgoing/hyper dog  dog that needs regular medication  senior dog  dog that needs grooming  shy dog  special needs dog  dog that must be an "only pet"  dog with a prey drive for cats or smaller animals  None of these

**Family Information**

What is the primary reason you want to adopt a dog?

Who will be responsible for the care of the dog?

Who will have financial responsibility for this dog?

Do you or does anyone you live with have an allergy to dogs?  yes  no

Empty space for additional information or comments.

Please list all children, with ages, who live in or frequently visit the home:

Child 1:

Child 2:

Child 3:

Child 4:

Have your children been around large dogs? Yes No

I agree to properly supervise my children when they are around the dog. Yes No

I agree not to allow my children to tease, torment, grab, pull on or hit the dog. Yes No

I agree to keep my children from disturbing the dog when it is eating or sleeping. Yes No

Please list name(s), phone number(s), and relationship of all adults who live in the home:

Adult 1:

Adult 2:

Adult 3:

Adult 4:

I have obtained permission from all adults living in the home to have a dog and all agree that the dog will be allowed to enter the house and sleep inside the house. The dog will live inside my home and will not be isolated from the family. Yes No

### Other Pets

Do you have specific experience with large dogs? yes no

What experience do you have with pets?

Are there other pets in the home? How many and what kind?

Pet 1:

Pet 2:

Pet 3:

Pet 4:

Are your current pets spayed or neutered? yes no

If your pets are not spayed or neutered, why not?

Are these pets up to date on vaccines? yes no

Have you every surrendered a pet? If so, why?

Have you ever had a pet euthanized? If so, why?

Have you ever lost a pet to an accident? What were the circumstances?

How do you discipline your pets and why?

Do you have time to provide adequate love and attention to a pet?

### Environment Information

Do you own rent

Type of dwelling: house condo apt. other

If you rent, how may we contact your landlord to confirm that you are allowed to have a dog?

Landlord's name

Phone

(By providing this information you are allowing APFPRI to contact your landlord. Please inform them of this call so they will speak with us)

Please describe your household: Active Noisy Quiet Average

Is your neighborhood/complex dog friendly? yes no

Do you have a yard? yes no

Size of yard?

Is your yard fenced? yes no Fence height & material?

Gate(s) securely locked? yes no

Pool? yes no Is your pool separately fenced? ( ) yes ( ) no

If you do not have a yard, where will the dog go to the bathroom?

When the dog goes out, how do you plan to supervise it?

Where will the dog stay during the day?

Please describe where the dog will sleep at night:

Where will the dog stay when you are not home?

Hours per day will the pet be alone:

Do you have a crate? yes no

What is the maximum amount of time you would leave the dog in the crate?

What will you do to shelter the dog in the event of severe weather conditions (extreme hot or cold, rain, snow, thunderstorm)?

I agree to provide a safe and enclosed environment for my dog and that the dog will not be left tethered or chained to a stationary object while unsupervised or for more than a short time

yes no

**WE DO NOT ALLOW OUR DOGS TO BE KEPT EXCLUSIVELY OUTDOORS!**

Are you willing to let a representative of APFPRI visit your home by appointment? Yes No

What do you do with your dog when you go on vacation?

Who will care for this animal in your absence and how can they be contacted?

I agree to never transport the dog in the open bed of a pickup truck. yes no

I agree to never leave my dog enclosed in a motor vehicle parked in direct sunlight or on a hot day. yes no

**Commitment and Responsibility**

Your dog may live 15 years or more. Are you committed to providing a responsible home for your pet's entire life? yes no

How much time are you prepared to allow for your new pet to adjust to your home?

How many times a day will you walk your dog?

Have you ever housebroken a dog? yes no

What do you feel is the best way to discipline a dog?

I am willing to consult a dog trainer, behaviorist or other professional in the event my dog has behavioral issues

Yes No

Describe what you would do if your dog develops a problem with:

Housebreaking:

Digging:

Barking:

Chewing:

Separation Anxiety:

Escaping/Running Away:

Aggression:

Under what circumstances would you not keep a dog?

Under what circumstances would you euthanize a dog?

What will happen to this pet if you move?

If you are injured or have a serious illness, who will care for the dog?

I will not have the dog attack-trained, nor will I use it for any purpose other than companionship and I agree never to use the Dog for dog fighting. I will never allow any physical, mental, or emotional abuse of the dog Yes No

Do you agree to contact APFPRI if you can no longer keep this dog? Yes No

If for any reason you are required to rehome your dog, do you agree to work with APFPRI and make proper arrangements and efforts to find your dog a new home? yes no

### References

Please list someone who is familiar with both you and your other pets, if any.

Reference 1

Name:

Address:

Phone:

Relationship (relative, neighbor, friend, etc.):

Reference 2

Name:

Address:

Phone:

Relationship (relative, neighbor, friend, etc.):

### Medical Information

Veterinary Clinic/Doctor's Name:

Vet Address:

Vet Phone Number:

I understand that Akitas can be susceptible to a medical condition known as gastric torsion or bloat. I agree to avoid feeding my Akita foods containing wheat, corn or gluten. I understand that high quality dog foods are not widely available in the supermarket or grocery store and that these foods may be more expensive. yes no

I agree to provide regular health care by a Licensed Veterinarian: yes no

Are you able to afford bills for emergency veterinary care? yes no

**I verify that all the information I have provided on this application is true and correct**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*A Passion For Paws Rescue, Inc. is a 501(c) (3) non-profit group that charges an adoption fee of \$250-400. This adoption fee allows us to continue with our rescue efforts and will be non-refundable after 30 days. The adoption fee may be considered a tax deductible charitable donation, however please refer to applicable IRS guidelines. All dogs will be neutered/spayed, vaccinated and possibly micro-chipped before the adoption process is completed.*

*Please understand that our main concern is the welfare of the animal(s) and our goal is to place each dog in the best possible home. Pet ownership is a serious responsibility, and we ask you to make a lifetime commitment to the dog. THANK YOU FOR SAVING A DOG'S LIFE!*