Potential Dog Adopter Information Sheet and Release



Please note: You must provide a valid form of photo identification

Personal Information	
Name:	Spouse/Partner Name:
Street Address:	City, State, Zip Code:
County:	Housing Ownership: Own Rent
Home Phone:	Mobile Phone:
Email Address:	Employer:
Household Information	
Housing Type: House Condo Apartment Townhouse Dorm Mobile Home What is your Household's general noise and activity level? Low Moderate Active Very Active	If you rent your home and/or the property on which your home is located, please provide your Landlord's contact information (include name & telephone #)
Do you have a yard? Yes	Do you have fencing? Yes No If yes, type and height:
Where will the HOPE pet primarily be living? Inside: Home Garage Basement Barn Outside Other	
Number of adults in the household (list ages):	Number of children in the household (list ages):
Pet Information	
Is this your first experience with a dog?	What do you consider to be a reasonable time to allow the dog to adjust to your home?
In the past 5 years how many dogs have you owned?	What were the Breeds?
For how long did you have the dogs?	Which do you prefer? Male Female No Preference
Do you currently own any dogs or cats?	What type(s)?:
What age do you prefer?	Would you consider over 5? Yes No Would you consider over 8? Yes No
How many hours per day will the dog be left alone?	How many hours per day will the dog be crated?
How important is it that the dog be reliable loose outside? Very Somewhat Not at All	What characteristics are important to you? (Calm, playful, travels well, etc)
Are you willing to take the dog to obedience training?	How do you plan to Exercise the H.O.P.E. Pet?
Veterinarian Name:	Veterinarian Phone #:

Please explain how you have disciplined previous pets and how you plan to discipline a H.O.P.E. pet:	
Tell us about your perfect pet:	
Does the applicant(s) understand that by signing this application, a (s) and/or landlord to release any and all information requested to	pplicant(s) are providing authorization to the applicant's veterinarian H.O.P.E.? YES NO
By signing this form, I affirm that I am 18 years of age or older and that the information contained on this form is true to the best of my knowledge. I understand that this form is informational only and that H.O.P.E. reserves the right to deny any request to adopt any animal for any reason or no reason. I understand that animal behavior is sometimes unpredictable and that some animals are capable of inflicting serious personal injury or death, as well as extensive property damage. I agree on behalf of myself and any minors accompanying me to be bound by the following:	
a) Agree that the actions of animals, such as the animals at H.O.P.E., are impossible to predict or control and may cause serious injury, including permanent disability and death due, but not limited to: bites, scratches, knock downs, slips, falls, fractured limbs, broken bones, concussions, contusions, dislocated joints and dismemberment. Further, there may be other risks not known to the undersigned, H.O.P.E., its officers, directors, agents, volunteers or employees or not reasonably able to foresee at this time.	
b) Assume all the foregoing risks and accept personal responsibility for the dangers following such injury, permanent disability or death.	
c) Release, waive, discharge and covenant not to sue H.O.P.E., its officers, directors, agents, volunteers or employees, all of which are in this paragraph and hereinafter referred to as "releasees" from liability to each of the undersigned, his/her heirs and next of kin for claims demands, losses or damages on account of injury, including death or property damage caused or alleged to be caused in whole or in part by the negligence of the releasees, the undersigned or otherwise.	
Signature	Date
Signature:	Date