



# Diamond in the Ruff Dog Rescue



## PRE-ADOPTION APPLICATION

**Note: You must be 25 years of age to adopt a dog  
PROOF of age is required at time of adoption**

ADOPTER'S INFORMATION				
Name of dog you are considering adopting			Date	
Your Name				
Address		City	State	Zip
Home Phone (Include Area Code)		Cell Phone (Include Area Code)		
Work Phone (Include Area Code)		Fax Number (Include Area Code)		
Employer/Address/Phone Number				Employment Time
Email Address		FL Driver's License # or Valid I.D. #		
Are you a full time Florida resident? Yes <input type="checkbox"/> No <input type="checkbox"/>		Seasonal resident? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Type of housing?      Single Family Home <input type="checkbox"/> Mobile Home <input type="checkbox"/> Duplex <input type="checkbox"/> Apartment <input type="checkbox"/> <div style="text-align: center; margin-top: 5px;">Condominium <input type="checkbox"/>    Townhouse <input type="checkbox"/>    Villa <input type="checkbox"/></div>				
Name of Development				
Does your Association permit pets? Yes <input type="checkbox"/> No <input type="checkbox"/>		Is a Deposit Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	Deposit Amount \$ _____	Weight Limit for Dogs, If Applicable _____ lbs.
Do you own or rent?    Own <input type="checkbox"/> Rent <input type="checkbox"/>		If rent, do you have permission to have pets?    Yes <input type="checkbox"/> No <input type="checkbox"/>		
If you rent, please provide the name and phone number of your landlord.				
Name:		Phone Number: (    )		
Do you have a fenced in yard?    Yes <input type="checkbox"/> No <input type="checkbox"/>		Pool?    Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you plan on moving in the next 6 months? <div style="text-align: right; margin-top: 5px;">Yes <input type="checkbox"/> No <input type="checkbox"/></div>				
If you move, what will you do with your pet(s)?				
Do you or does anyone in your household have allergies or asthma? <div style="text-align: center; margin-top: 10px;">Yes <input type="checkbox"/> No <input type="checkbox"/></div>				

# PRE-ADOPTION QUESTIONS

Are you adopting this pet for yourself or for someone else?      Myself       Someone Else

What member of the family will be taking the **MAJOR** responsibility of caring for this pet?

List the names and ages of the members of your household. **(Include yourself)**

Name	Age
Name	Age
Name	Age
Name	Age

Have you ever had a cat or dog?      Yes       No   
 (List all the animals you currently have)

Dog/Cat (Name)	Age	Spayed/ Neutered	Up to Date On Shots	Cats Declawed	Status of Animal

(List any animals that you have previously had and that are no longer with you)

Dog/Cat (Name)	Age	Reason No Longer With You

Present Veterinarian/Address/Phone Number

Have you ever turned in an animal to an animal shelter?      Yes       No   
 If yes, why?

Have you every put a cat/dog to sleep for any reason?      Yes       No   
 If yes, please explain.

Is anyone home during the day?      Yes       No   
 If so, who?

If you are not home during the day, have you considered adopting two similar pets to keep each other company?  
     Yes       No

Where do you plan on keeping your pet while you are at work or not at home?

What will you do if your new pet doesn't get along with your current pet or pets?
How long will you give your new dog to adjust to its new home?
If your family status changed (new baby, married, divorced, job loss, relocation) who would keep the dog?
If something happens to you (sickness, death, etc.) and you cannot take care of your pet(s) who will take care of them?
When you go on vacation, where will your pet(s) go and who will care for them?
<b>Are you aware that we are not affiliated with any other rescue groups, and if you need to relinquish the pet(s) that you adopted from us, please call Diamond in the Ruff at 954-592-3333.    Yes <input type="checkbox"/>    No <input type="checkbox"/></b>
How did you hear about Diamond in the Ruff? Newspaper <input type="checkbox"/> Magazine <input type="checkbox"/> Friend <input type="checkbox"/> Internet <input type="checkbox"/> Other <input type="checkbox"/>
What do you think are the most important responsibilities of owning a pet?
Please supply the name, address and telephone numbers of two personal references (non-relatives).
Name: _____ Phone: _____ Address: _____
Name: _____ Phone: _____ Address: _____

I certify that the information I have given above is true and correct, and I hereby authorize the above listed veterinarian(s) to supply information in regard to my pets to Diamond in the Ruff. I also give my permission to Diamond in the Ruff to contact the above listed landlord and references. **Diamond in the Ruff has the right to deny any application without any questions and has the right to take back an adopted pet if they find the home is inadequate.**

**NOTE: Each adoption is followed up with a phone call and/or visit to check on the animal that has been adopted.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_