



Georgina Animal Shelter and Adoption Centre Dog adoption questionnaire

Application date: _____

Animal name: _____ Animal #: _____

Applicant contact details

Full name: _____ Phone: _____

Address: _____

Email: _____

Are you 18 years or older? Yes No

Applicant housing details

Describe your current home environment – detached house, apartment, farm, etc.

Will your pet have access to a fenced back yard? If not, describe the type of outdoor environment that your pet will have access to:

Is your home rented or owned?

Rented

Owned

If rented, have you confirmed you are allowed to have pets?

Yes

No

Home environment

Describe your home environment and who will be interacting with your pet on a regular basis. If this includes children, provide their ages:

Describe the pet handling and ownership experience of the members in your household:

Are you aware of any pet allergies of anyone that will be regularly interacting with your pet?

Where will your pet spend most of its time in the home – main floor, outside, free roam of the home, etc.?

How many hours do you anticipate your pet being alone and where will it be kept during this time?

Will your pet be required to use a crate and if so, have you experience with crate training?

Describe your exercise routine for your current or future pet(s):

When you travel, what arrangements will be made to care for your pet?

Are you aware of the dog by-law in your municipality?

Pet ownership experience

Tell us about your previous pet ownership, including any personal and professional dog training experience:

If you have any pets currently, describe them including their breed, personality and how they interact with other pets:

Describe the medical care history for your current pet(s) including their spay/neuter/vaccine status:

Describe, if any, experience that you have had with medical or behavioural challenges with your past or current pet(s):

Describe what steps you would take to resolve a medical or behaviour challenge that developed with your new pet:

Provide the name of the veterinary clinic that you currently use:

Do you give us permission to contact your veterinarian for a reference?

Yes

No

Pet care experience

Tell us about your experience with grooming pets such as coat or nail care:

Tell us about how you would prevent your pet from becoming infected with parasites such as fleas or ticks:

Provide us with examples of typical care expenses that you would anticipate with pet ownership:

Pet compatibility

Describe the type of personality that you are looking for in a pet companion:

Describe the activity level that you are looking for in a pet:

Will this pet be expected to be a service or working dog?

Are you prepared for the lifelong responsibility of a pet that may have entered into the shelter with an unknown behavioural or medical history?

Are there any behaviours or medical problems that would prevent you from moving forward with adopting a pet?

Is there anything else that you would like to share at this time?

Reference and adoption fee

Provide a reference that is familiar with your ability to care for a pet

Name: _____ Relationship: _____

Phone: _____

How did you learn about the pet that you have applied to adopt?

Confirm that you are aware of the pet adoption fee of \$250 plus HST

Yes

No