



**SARA Dog & Puppy Adoption Application**

Dog adoption fee: \$75  
Puppy adoption fee: \$75

Please write legibly and complete the entire application. You may mail, fax or email the application. Email by copying and pasting this text into the body of your email.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone#: \_\_\_\_\_ Work#: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of animal you are interested in, if known: \_\_\_\_\_

- 1. Why do you want to adopt a new dog/puppy?  
\_\_\_\_\_
- 2. Do you have any pets right now? If so, how many and what kind?  
\_\_\_\_\_
- 3. Are all your pets spayed or neutered? If not, why not?  
\_\_\_\_\_
- 4. If you have had pets in the past, but do not have them now, what happened to them?  
\_\_\_\_\_  
\_\_\_\_\_
- 5. Do you know about necessary vaccinations for your pet?  
\_\_\_\_\_
- 6. Are your current pets vaccinated against disease? \_\_\_\_\_  
If so, which shots does your pet receive? \_\_\_\_\_
- 7. Does your pet receive heartworm preventative? \_\_\_\_\_  
If so, what kind? \_\_\_\_\_
- 8. Please provide your veterinarian's name, address and phone number  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 9. Do you rent or own your home? Rent \_\_\_\_\_ Own \_\_\_\_\_
- 10. If you own your own home, are you prepared to provide proof of ownership upon request to SARA? \_\_\_\_\_
- 11. If you rent, please supply your landlord's name and phone number.  
\_\_\_\_\_

12. Tell us about your yard (size, shade trees, etc.):

---

---

13. Are your pets allowed inside your home? \_\_\_\_\_

Will this new dog or puppy live mostly inside or outside? (please provide percentages)

Inside \_\_\_\_\_ Outside \_\_\_\_\_

14. Will this dog or puppy be chained? \_\_\_\_\_ If so, what percent of the time? \_\_\_\_\_

15. Would you allow your dog to ride in the back of a pick up truck? If so, will you provide restraints?

---

16. What would happen to your pets if you had to move?

---

---

17. How will this new pet fit into your home?

---

---

18. Will this new dog or puppy be given plenty of exercise? Yes \_\_\_\_\_ No \_\_\_\_\_

How often do you see yourself walking, running or playing with the dog/puppy? (times per week) \_\_\_\_\_

19. Would you object to a home visit by a SARA representative? Yes \_\_\_\_\_ No \_\_\_\_\_

20. Are there children in your family? Yes \_\_\_\_\_ No \_\_\_\_\_

How many and their ages? \_\_\_\_\_

21. Have you taught your children to treat animals with respect and kindness?

---

22. What would happen if your pet became ill?

---

---

23. In the event that something should happen to you, who would care for your pets?

---

---

24. If for any reason, this new pet did not work out, do you agree to return her/ him to SARA Sanctuary?

Yes \_\_\_\_\_ Maybe \_\_\_\_\_ No \_\_\_\_\_

25. Please provide the names, addresses and phone numbers of **three people** as references that have known you for **at least five years**.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

---

---

---

To the best of my ability, I agree to care for the dog/puppy and welcome it into my family; to provide love, food, exercise, medical attention (if needed) and companionship. If for any reason, I am not able to care for the dog/puppy or the dog/puppy is incompatible in my home environment, I agree to return the animal to SARA Sanctuary. I will not sell the dog/puppy. I will not give away or seek to adopt out the dog/puppy without permission from Tracy Frank, or a SARA representative acting on her behalf.

Your name: \_\_\_\_\_

Date: \_\_\_\_\_