



GRACIE'S GUARDIANS ADOPTION APPLICATION

FIRST NAME: _____ LAST NAME: _____

DRIVERS LICENSE #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOW LONG HAVE YOU LIVED HERE? _____

HOME PHONE#: _____ CELL#: _____

BIRTHDATE: _____ E-MAIL: _____

EMPLOYER: _____

OCCUPATION: _____

EMPLOYER PHONE NUMBER: _____

WHY ARE YOU INTERESTED IN ADOPTING A PIT BULL? _____

PLEASE DESCRIBE ANY PREVIOUS EXPERIENCE WITH PIT BULLS _____

ARE YOU INTERESTED IN A SPECIFIC DOG? _____

IS THIS DOG FOR YOU OR SOMEONE ELSE? _____

MARITAL STATUS: MARRIED___ SINGLE___ PARTNER___

PLEASE LIST ALL INDIVIDUALS WHO LIVE IN YOUR HOUSEHOLD AND THEIR AGES

DO ANY CHILDREN HAVE ANY EXPERIENCE WITH ANIMALS? _____

DO YOU OWN OR RENT? _____ SQUARE FOOTAGE: _____

NAME OF LANDLORD: _____ PHONE#: _____

IS THERE A WEIGHT OR BREED RESTRICTION (BE SPECIFIC)?

DOES YOUR HOMEOWNER'S INSURANCE COVER PIT BULLS? _____

DO YOU HAVE A FENCED IN YARD? _____ TYPE/HEIGHT: _____

DO YOUR NEIGHBORS HAVE DOGS? _____

WHERE WILL YOU KEEP YOUR PIT BULL WHEN YOU ARE NOT HOME?

DO YOU HAVE A CRATE? Y ___ N ___

HOW MANY HOURS A DAY WILL YOUR PIT BULL BE LEFT ALONE? _____

LIST ALL OTHER PETS YOU OWN (NAME/BREED/SEX/SPAYED OR NEUTERED/AGE):

1 _____

2 _____

3 _____

4 _____

VET'S NAME: _____ PHONE # _____

WHO WILL WATCH YOUR PET WHEN YOU ARE OUT OF TOWN/AWAY FOR THE NIGHT?

WHAT WOULD HAPPEN TO YOUR PET IF YOU HAD TO MOVE?

DOES ANYONE IN YOUR HOUSEHOLD HAVE ALLERGIES THAT MIGHT BE TRIGGERED BY A DOG? _____

DID YOU HAVE PETS BEFORE THAT ARE NO LONGER WITH YOU? _____

WHAT HAPPENED TO THOSE PETS? _____

HAVE YOU EVER SURRENDERED AN ANIMAL TO A SHELTER OR RESCUE? _____

TYPE OF ANIMAL: _____ SHELTER: _____

REASON FOR SURRENDER: _____

HAVE YOU EVER BEEN REPORTED TO ANIMAL CONTROL, OR HAD AN ANIMAL REMOVED FROM YOUR CARE?

IF YES, WHAT HAPPENED? (BE SPECIFIC)? _____

WHAT BEHAVIORS DO YOU FIND UNACCEPTABLE IN A PET? _____

HOW WOULD YOU DEAL WITH UNACCEPTABLE BEHAVIORS?

ANNUAL ESTIMATED COST YOU WILL SPEND ON THIS ANIMAL: _____

REFERENCES (PLEASE LIST THREE PEOPLE OUTSIDE OF YOUR HOME):
NAME/ADDRESS/PHONE NUMBER/RELATIONSHIP

1 _____

2 _____

3 _____

BY SIGNING BELOW, I CERTIFY THAT ALL THE ABOVE INFORMATION IS TRUE, AND I RECOGNIZE THAT ANY MISREPRESENTATION OF FACTS MAY RESULT IN LOSS OF MY ADOPTION PRIVILEGES. I CERTIFY THAT I HAVE NEVER BEEN CONVICTED OF ANIMAL CRUELTY, NEGLIGENCE, ABUSE, OR ABANDONMENT
I AUTHORIZE VERIFICATION OF ALL STATEMENTS IN THIS APPLICATION WITH LISTED VETERINARIAN, REFERENCES AND LANDLORD.

GRACIE'S GUARDIANS RESERVES THE RIGHT TO REFUSE ADOPTION TO ANYONE AT THEIR DISCRETION.

SIGNATURE

DATE