



Name of dog you wish to adopt: _____

Pasado's Safe Haven Adoption Application – Dog

Date: _____

Name: _____ Home Phone: _____

Address: _____ Work Phone: _____

City: _____ State: _____ Zip: _____ E-mail Address: _____

Employer: _____ Occupation: _____

Spouse/Partner Name: _____ Work Phone: _____

Spouse/Partner Employer: _____ Occupation: _____

1. Briefly describe why you would like to adopt a dog. _____

2. Do you feel this is a lifetime commitment? If so, why? _____

3. What could happen in your life that would make you give up this pet (pregnancy, moving, new relationship, etc.)? _____

4. Have you consulted with your spouse/partner/roommate regarding this adoption? Yes No

5. How does your spouse/partner/roommate feel about a dog? _____

HOUSEHOLD:

6. Do you live in: House Townhouse Condo Mobile Home Apt, Complex Name _____

7. Do you: Rent Own

8. If renting, please provide landlord's name and number: _____

9. Do you have permission from the landlord to keep a pet? Yes No

10. Please indicate yard size: Large Medium Small None

11. How tall is your fence? 4ft 5ft 6ft None

12. Is your yard completely fenced? Yes No

13. Do you have a dog run or dog house? Yes No

14. Please list the names of all your household members. Include ages for household members under age 18.

15. Who will be primarily responsible for the care and supervision of the animal? _____

16. Will this dog be in the presence of children frequently? Yes No. If yes, what ages? _____

17. Do any household members have known allergies to dogs? Yes No

18. Please list the pets that you have had in the past five years (both current and those you no longer own):

Breed/Type	Age	Sex	Spayed/Neutered	How long owned?	What happened to him/her?
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

19. Are all animals spayed/neutered? Yes No. If not, please explain: _____

PET CARE:

20. Do you have a veterinarian for your pet(s) ? Yes No. Name and Phone Number of Clinic: _____

21. Approximate date of last vaccinations for current pet(s): _____

22. What will happen to this dog if you move? _____

23. The lifetime cost of providing guardianship to an animal can cost thousands of dollars, especially if surgery or chronic disease requires long-term care. Are you able and willing to support a pet financially for its entire life? Yes No

24. Where will your dog spend the day? Basement Garage Loose Indoors Loose Outdoors Crate

Tied Up Outside Other

25. Where will your dog spend the night? Basement Garage Loose Indoors Loose Outdoors Crate

Tied Up Outside Other

26. On the average, how many hours per day will the dog be alone? _____

27. How will the dog get adequate exercise? _____

28. Have you ever had to surrender an animal? If so, please describe the reason for surrender: _____

29. Do you have steps in or outside your house? Yes No If so, how many? _____

30. If you're adopting a senior dog, will the dog be able to go outside to the bathroom easily? Why? _____

31. If adopting a senior dog and he/she has difficulty getting up to walk, what will you do to assist them? _____

32. If adopting a senior dog, would your work or social schedule or travel prevent you from caring for them if they need assistance at home? Yes No

33. If adopting a senior dog and he/she becomes incontinent, how would you deal with this? _____

ANIMAL SELECTION/BEHAVIORS:

34. As an adult, have you owned a dog? Yes No

35. How active a dog do you want? Agility Running Companion Walking Companion Lounging

36. When did you last housetrain a dog? _____ What method did you use? _____

37. What type of obedience training will you provide? Class On your own None Other

38. What is your method of correcting poor behavior in an animal (i.e. soiling in house, play biting, etc) ? _____

39. Please describe the activity level(s) at your home. (i.e. very busy, calm, noisy, etc.) _____

40. For what potential problems do you feel unprepared? *Please check all that apply.*

Biting Housesoiling Not good with other animals Not good with children Excessive chewing

Excessive grooming needs Excessive activity level Medical Issues Confinement issues

Other _____

41. Pasado's Safe Haven requires a non-refundable donation of \$150.00 This donation, in part, covers the cost of veterinary and daily care for the animal since it arrived at Pasado's Safe Haven. It also, in part, covers spay/neuter, if necessary, all vaccinations, microchipping, de-worming, and de-fleaing. This is a donation, not a "purchase price" for the animal. Would you have any problem paying the donation fee?

Initial here: _____ Yes No

ANIMAL ADOPTION AGREEMENT

My signature below indicates that I have read, and that I agree to enter into and fully abide by the terms and conditions of the Animal Adoption Agreement between myself (herein referred to as "Adopter") and Pasado's Safe Haven. **I COMMIT THAT IF, FOR ANY REASON, I CANNOT KEEP MY ADOPTED ANIMAL OR CHOOSE TO DISCONTINUE CARE FOR THEM, I WILL RETURN THEM TO PASADO'S SAFE HAVEN.**

Adopter, upon adoption application approval and payment of the \$150 non-refundable donation, adopts the following animal or animals from Pasado's Safe Haven:

Type:_____ Gender:_____ Spayed/Neutered: _____ Estimated Age:_____

1. Adopter understands that animals available for adoption from Pasado's Safe Haven have been rescued from a variety of abuse and neglect situations from factory farms, stockyards, auctions, hatcheries, slaughterhouses and elsewhere and as such, may have illnesses, genetic disorders, diseases or other health and/or behavioral problems.

Initial here: _____

2. Adopter understands that Pasado's Safe Haven is not in a position to know, and makes no representations, warranties or guarantees with respect to the background, temperament, health or lifespan of the animal or animals adopted and Adopter agrees to accept the animal or animals upon this understanding.

Initial here: _____

3. If adopting one of Pasado's Safe Haven senior dogs, adopter understands that senior animals are likely to require expensive veterinary care ranging in the hundreds to thousands of dollars for common geriatric conditions including but not limited to dental disease, arthritis, cataracts, blood disorders, kidney disease, liver disease, heart murmurs/disease, diabetes, infection, cancer, and thyroid disease. Many of these conditions can be successfully controlled with immediate and ongoing veterinary care. Some conditions are terminal. Adopter understands the animal he/she is adopting may possess one or more of these conditions, unbeknownst to Pasado's Safe Haven. Adopter will therefore seek immediate quality veterinary care for this animal and will continue doing so for the duration of the animal's life.

Initial here: _____

4. Adopter releases Pasado's Safe Haven from any and all liability for any personal injury, property damage or any other losses caused by the animal or animals adopted herein whether such injury, damage or loss is caused to Adopter, members of Adopter's family, other animals under Adopters care, or to any other person, animal or entity. Adopter further assumes the full risk of any such injury, damage and/or loss and the payment of any resulting liability.

Initial here: _____

5. Adopter understands and agrees to assume full responsibility for the health and welfare of the animal or animals adopted for the duration of the natural life of the animal or animals. This responsibility includes, but is not limited to, all costs incurred for veterinary and health needs, housing and shelter, feed and any other expense related to the care and welfare of the animal or animals adopted herein.

Initial here: _____

6. Adopter understands and agrees to provide the animal or animals adopted herein the following minimum conditions of care:

- a. Except where necessary for medical purposes and upon the recommendation of a veterinarian, the animal or animals adopted herein may never be subject to any mutilation procedures such as (but not limited to) tail-docking or declawing.
- b. The animal or animals adopted herein must, at all times, have appropriate housing and shelter facilities, feed and health care. The greatest care must be taken to assure animals are not subjected to attack from dogs, cats, or wildlife.
- c. The animal or animals adopted herein must, at all time, have adequate and suitable human companionship. The animal or animals may only be isolated for the purposes of veterinary treatments and health care.
- d. Adopter must, at all times, treat the animal or animals adopted herein with respect and never willfully subject the animal or animals to any type of abuse, neglect, suffering or isolation.

Initial here: _____

7. Adopter grants permission to Pasado's Safe Haven to conduct unannounced onsite inspections of Adopter's animal facilities and to conduct health inspections of the animal or animals adopted herein. Pasado's Safe Haven guarantees that only a board or staff member of Pasado's Safe Haven will conduct inspections and no other individual, party, public entity, or media entity will be allowed to enter into inspections or investigations to protect the privacy of Adopter. Adopter understands that at any time Pasado's Safe Haven, in its sole discretion and without police or judicial authorization, can confiscate the animal or animals adopted herein from Adopter's premises when Pasado's Safe Haven believes such confiscation is necessary for the health and welfare of the animal or animals adopted herein.

Initial here: _____

8. Adopter understands and agrees that if Adopter is unwilling or unable to continue caring for the animal or animals as provided herein, that Adopter may not relinquish custody of the animal or animals to any other party without first notifying and obtaining the written permission of Pasado's Safe Haven.

9. Adopter understands that Adopter can return the animal or animals adopted herein to Pasado's Safe Haven on the condition that Pasado's Safe Haven is given advance notice of at least two business days to prepare for the return.

Adopter further understands that Adopter will not be entitled to a refund of any adoption fees remitted to Pasado's Safe Haven, and Adopter will be responsible for transportation costs, or any other costs incurred resulting from the return of the animal or animals to Pasado's Safe Haven.

Initial here: _____

10. Pasado's Safe Haven guarantees that Adopters personal information will not be made public, be added to any mailing list, or be sold for any mailing lists unless permission to do so is granted to Pasado's Safe Haven by Adopter.

Adopter has read the above Pasado's Safe Haven Adoption Agreement consisting of five pages total, and agrees to fully abide by each and every term and condition stated therein.

Initial here: _____

Signature

(Printed Name)

(Address)

(Phone)

PLEASE SIGN AND MAIL TO US AT P.O. BOX 171, SULTAN, WA 98294 OR FAX TO 425-820-1717. IF FILLING OUT AND SENDING VIA EMAIL, FILLING OUT THE ABOVE INFORMATION CONSTITUTES ACCEPTANCE OF ABOVE TERMS. THANK YOU!