



Adoption Application
Non-profit 501(c) (3)
Collingswood, NJ 08108
Info4WoofLoveRescue@gmail.com

How did you hear about us?

This document is fillable using Adobe Acrobat both on computers and mobile devices. Download the free adobe reader on your personal computer here. https://get.adobe.com/reader/ Mobile devices use their app store to download. Printed and scanned or .jpg files are also accepted. Submission of an application does not guarantee you will receive a pet. Approved applicants will be contacted by volunteer

Name(s)* _____ Date* _____

Street address* _____ City, _____ State, _____ Zip* _____

Email Address* _____ Cell Phone* _____

Have you applied in the past? If so, when?*

_____ Facebook name* _____

PLEASE NOTIFY YOUR VET THAT WE WILL BE CALLING

Current Veterinary Name* _____ Phone number* _____

Past Veterinary Name* _____ Phone number* _____

Name on Veterinary Account _____ Vet services done at a clinic? Provide phone number _____

*List all pets past and present

Table with 7 columns: Name, Breed, Sex, Age, Spayed/Neutered, Time owned, Current health/ Death

*List 3 Personal Non Family References. First and Last name. Please do not list your vet here.

Table with 3 columns: Name, Phone Number, Relationship

*If anyone outside the home will be assisting with pet care please provide:

Name* _____ Phone* _____ Care provided* _____

Do you own or rent*? Own [] Rent [] If renting provide: Landlords name* _____ Phone* _____

Are there and breed or size restrictions?* Yes _____ No _____

Breed(s) _____ Size _____

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Type of home:* Single family _____ Duplex _____ Apartment _____ Mobile Home _____ other _____

How long have you been at current address?* _____ Do you have plans on moving?* Yes _____ No _____ If yes, when? _____

Is your yard fenced?* Yes _____ No _____ Partial _____ Fence type* 4ft _____ 6ft _____ 8ft _____ wood _____ vinyl _____ chain link _____

Will you welcome a volunteer to come to your home for a home visit?* Yes _____ No _____

You are: Single _____ Married _____ Divorced _____

List Yourself and All occupants of your household. INCLUDE Name, Age and Gender*

Adults: _____

Children: _____

Is anyone in the household allergic to pets?* Yes _____ No _____ If yes, who? _____

What is the occupation of head of household and partner?* _____

What hours are you typically away from home?* _____

Does anyone work from home?* Yes _____ No _____ If yes, who?* _____

Describe a typical day for your pet. Consider how long you are away from home, exercise and play time*

Where will your pet stay when you are not home and what is your puppy plan for longer days away?*

What do you think a pet will bring to your family and are all household members in agreement with adopting a dog?*

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How do you plan on training your dog and what steps will you take if there are behaviors or characteristics that are challenging?*

Under what circumstances would you consider rehoming a pet? If you have ever had a pet for a short period of time explain.

What is your plan for house training? Share your opinion of crate training.

Where will your pet sleep at night?*

What will you do with your pet when you go on vacation?*

Gender of pet preferred?* Male ___ Female ___ Either ___

Age Range* _____ Size* (Full Grown) _____ Activity level* _____

Have you done any breed specific research, online or print?*

Can you commit to a life time of caring for your pet? Consider regular and emergency medical care can typically cost, routinely, \$200-\$1,000 or more.

Yes ___ No ___ if no, explain _____

Pet ownership can be challenging and even the best owners occasionally need help. If behavior and/or obedience training becomes necessary or advised, you are agreeing to obtain recommended training and incur the associated cost by submitting this application.*

Yes ___ No ___ If no, explain* _____

If a new puppy seminar is recommended for the pet are you willing to attend?* Yes ___ No ___ If no, explain _____

Have you ever taken a pet through training?* Yes ___ No ___

Adopting a dog is a 10-15 year commitment lasting the life of your pet. Who will care for your dog if you become ill or unable to do so?*

Thank you for choosing to adopt from Woof Love Rescue. We are a volunteer run, Foster based organization. We work hard for our pets and adopters to make the best possible matches. Please allow adequate processing time as we consider the needs of our pets and adoptive families. Complete application in full with all names and contact numbers. Missing information delays processing time. Please review application for completeness and accuracy before submitting to the volunteer email address found in the adoptable listing or you can return to Info4WoofLoveRescue@gmail.com