

## Rescued Rollers Adoption Application

Thank you for applying to adopt from Rescued Rollers. If you are completing a printed copy of this form, our mailing address appears on the last page. It is also acceptable to scan the completed application and attach it to an email as a PDF file addressed to: [info@RescuedRollers.com](mailto:info@RescuedRollers.com). Please do NOT send cell phone pictures of this document. They will not be accepted.

**Instructions:** fill out the application as completely as possible. The more information we have to get to know you, the better chance we have of finding the right match for you. You may add additional pages if you have more information that you think we should know when we consider your application.

<b>Section I: About You</b> (Applicant must be at least 18 years old)									
<b>Applicant Name:</b>			<b>Complete Address:</b>						
Home Phone:									
Work Phone:			<b>E-mail Address:</b>						
Cell Phone:			<b>Birth Year:</b>						
Employment:	<input type="checkbox"/>	Work full time	<b>Employer:</b>						
	<input type="checkbox"/>	Work part time	<b>Position:</b>						
	<input type="checkbox"/>	Retired	<b>How long employed there:</b>						
Are you in the military?			<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<b>Please note:</b> Applying with other rescue groups does not affect whether or not we will work with you. We cooperate with other rescue groups in order to find each dog the best possible home.		
Have you placed an application with any other rescue group?			<input type="checkbox"/>	Yes	<input type="checkbox"/>	No			
If so, which one(s)?									
<b>References</b> (By completing this section, you give us permission to contact these people on your behalf)									
1. Local non-relative, not living with you, who knows you well and perhaps has known your animals.									
<b>Name:</b>				<b>Full Address:</b>					
Phone:									
2. Relative (not living with you):									
<b>Name:</b>				<b>Full Address:</b>					
Phone:									
<b>3. Veterinarian:</b>				<b>Vet Phone:</b>					
<b>Section II: About Your Home</b>									
<b>What are your living arrangements?</b>				<b>Please check all that apply:</b>					
<input type="checkbox"/>	Own		<input type="checkbox"/>	House	<input type="checkbox"/>	Townhouse			
<input type="checkbox"/>	Rent		<input type="checkbox"/>	Apartment	<input type="checkbox"/>	Mobile Home			
<input type="checkbox"/>	Live with parents		<input type="checkbox"/>	Duplex	<input type="checkbox"/>	Other (please explain):			
How long have you lived at this residence?									
If renting, please provide your landlord's contact information below (by providing this information, you give Rescued Rollers permission to contact your landlord.)									
<b>Landlord Name:</b>				<b>Address:</b>					
Phone Number:									

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Are there any restrictions that prevent you from having a dog, or certain breeds, or a size limit on a dog?	Yes	No	If yes, please explain:		
Do you have permission from the property owner to have a dog?					
(Proof of ownership or lease with pet clause may be requested to be viewed.)					
Please tell us about the ages and relationship of all the people who live in your home:					
Age	Relationship	Age	Relationship	Age	Relationship
Do any children visit on a regular basis (for example, grandchildren)?			Yes	No	If yes, what are their ages?
Do you have a yard, securely and physically fenced so that a small animal could not escape?					Describe the fence material and height:
Does a door from your house open directly into the fenced yard?					How large is your fenced area?
If you don't have a fence, how do you plan to contain your pet when it is outside?					
<b>Section III: About Senior or Special Needs Pets and You</b>					
What are your expectations about a senior or special needs pet?					
Have you ever owned a senior or special needs pet?	Yes	No	Please tell us about that experience:		
Where will this pet be kept while it is alone during the day?			At night?		
Is anyone home during the day?	Yes	No	Who?	How many hours will this pet be alone each day?	
			How many hours/day?		
Who will be responsible for the primary care of this pet (feeding, exercising, etc.)?					
How frequently do you travel?					
Who will care for this pet if you are away on overnight absences?					
Are you able to spend the money for your pet in an emergency situation? Costs can be expensive. What is your plan to pay for emergency care?					
How will this pet be allowed to relieve itself daily?		I will let it out in the fenced yard			
		I will walk it on leash			
		I have a doggie door, so it can come and go as it pleases			
		I have a "tie-out" trolley or stake			
		I use "puppy pads" so it doesn't have to go out			
		Other:			

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How will you allow this dog to run and exercise?		I have a fenced yard where it can run and play by itself.
		I/We will play with the dog in the yard
		I will walk it on a leash for _____ miles every day
		I will run/jog with the dog
		I will take the dog to a securely fenced dog park nearby
		Other:

## Section IV: About Your Other Pets

Please list all your current pets:	Breed	Name	Sex	Age	Spayed/Neutered?

Are all pets current on vaccinations?	Yes	No	If not, please explain:	

Please tell us about your experience with senior or special needs pets. What was your biggest challenge in caring for them?	
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What brands of heartworm preventative and flea/tick control do you use for your pets?	
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Have you ever participated in obedience training with a pet?	Yes	No	When?		
			Who was your trainer?		
	If yes, please answer the questions on the right.		What methods of training were you taught?		
			Did you continue your dog's training after the class?		
			What were the results?		

Are you willing to take the adopted pet to obedience training?	Yes	No	Maybe	If "No" or "Maybe" on these two questions, please explain:	
Are you willing to take the time to work with a pet who may need remedial housetraining or is incontinent?					

## Section V: About Your Desired Pet

What is your gender preference?		Would you consider the opposite gender?	
What age range would you prefer?		What size pet would you prefer?	

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Would you consider a bonded pair?		Would you consider a senior pet?	
Would you consider an incontinent pet?		Would you consider a wheelchair pet?	
Would you be willing to adopt a "special needs" (blind, deaf, sick, 3-legged, needs medication, overly shy) pet?			
If yes, what kind of special needs would you consider?			
Would you be willing to work with a behavior problem?			
If yes, what kinds of problems are you willing to work with?			
Do you have a temperament preference? (Couch potato, Frisbee, jogging partner, quiet companion, etc.)			
Is there a pet characteristic or behavior that you do NOT want?			
Please add any information that we haven't covered so far that will help us know you better. You may attach additional pages as needed.			
<b>Section VI: Miscellaneous</b>			
Are you applying to adopt a particular animal? What is their Name and/or ID Number?			
Did someone refer you to Rescued Rollers? If so, who was it? If not, how did you hear about us?			
<b>Section VII: Affirmation</b>			
I affirm that no legal charge for animal abuse has ever been made against me or anyone in my immediate household.			
I acknowledge that all the information contained on this form is true and correct. I understand that any misrepresentations of fact may result in the reclaiming of the adopted pet by Rescued Rollers.			
Typing or signing your name(s) here constitutes a formal signature:			
Applicant signature:		Date:	
Co-applicant signature:		Date:	

**Rescued Rollers reserves the right to refuse any applicant.**

Thank you for taking the time to fill out this application; it is essential to the adoption process. Rescued Rollers is a non-profit, tax exempt organization that desires to place these wonderful animals in loving homes and give them a second chance at a happy, healthy life. If you are patient with our process, we will try to provide you with a devoted and loving companion.

Please return completed application as a Word or .pdf document attachment by e-mail to: [info@RescuedRollers.com](mailto:info@RescuedRollers.com). If you want to mail this completed application, please send to the following address:

Rescued Rollers  
 Attn: Adoption Coordinator  
 P.O. Box 326  
 Galion, Ohio 44833