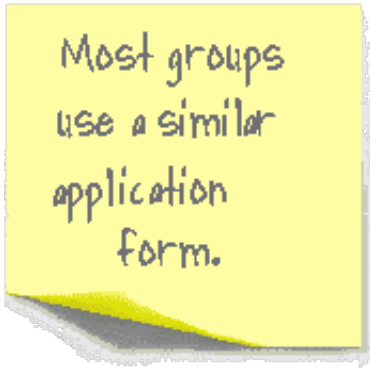


Sample Adoption Application



NAME _____ ((sample)) _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ BUSINESS PHONE _____

OCCUPATION _____

WHERE DID YOU LEARN ABOUT US? _____

1. Why do you want a Greyhound as a pet? _____

2. Do you have any preference regarding age, sex or color?

3. What other pets do you have? _____

4. Number of adults in your household and ages: _____

5. Number of children and their ages: _____

6. Do you have a fenced in yard? _____ What size? _____

Fence height? _____ If not, is there a fenced in area nearby where you can regularly exercise your Greyhound? Describe that area and its size: _____

You can not ever put your Greyhound on a chain run. It can literally break its neck.

7. Approximately how many hours a day will your Greyhound be home alone? _____

8. Describe the area in which you live: _____
City: _____ Suburban: _____ Rural: _____

9. Do you live in a: House _____ Apartment / Condo _____ Townhouse _____ Mobile Home _____

10. If you rent or lease, do you have permission from your landlord to have a dog? _____

11. Landlord's Name: _____
Phone Number: _____

12. Who will be responsible for the care and training of your new Greyhound? _____

13. Are you willing and able to leash-walk your Greyhound for necessary functions at least three times day?

-
14. Are you aware of the importance of keeping your Greyhound on a leash? _____
15. Greyhounds MUST live within the home. They can not adequately be kept in an outdoor kennel or dog house.

Do you agree to keep your new pet inside your house?

16. Is there a legal ordinance in your area pertaining to owning / housing an animal (i.e. leash laws, required vaccinations or dog licenses, etc.)?
-

17. Are you willing to keep a collar with a tag bearing your name, address and phone number on your Greyhound at all times? _____

18. If, for any reason, you are unable to keep your Greyhound, will you agree to return it to this adoption service? _____

19. Are you willing to accept immediate and full responsibility for the owner-ship of your Greyhound, including all health care costs and necessary burdens and responsibilities of owning a pet? _____

20. Did you have other pets in your home previously? Please name breed, name, and years in your household: _____

21. Do you agree to give your pet heartworm preventative? _____

22. Will you keep your Greyhound as a pet and agree not to race, breed, or hunt with this animal? _____

REFERENCES

Veterinarian's Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: _____

Please list two references that you have known for more than two years:

If you do not have a vet, list 3 references. At least one of your references should be a neighbor.

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: _____

I certify that the information on the Greyhound Adoption
Application is true and correct.

Signature ((sample) Date: _____