



ADOPTION APPLICATION

Adopter Information

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ CELL/WORK PHONE: _____

EMAIL: _____

DRIVER'S LICENSE #: _____ EXP DATE: _____ DOB: _____

EMPLOYED BY: _____ EMPLOYER'S PHONE: _____

Home Information

NAME of ALL HOUSEHOLD MEMBERS: _____

of HOUSEHOLD MEMBERS: _____ # of CHILDREN: _____

CHILDREN'S AGES: _____

1. In what type of home do you reside? (Circle one)
 SINGLE DUPLEX APARTMENT TOWNHOUSE CONDO MOBILE
 Other: _____
2. Do you rent or own your home? RENT OWN
 a. If applicable, Landlord's Name & Phone: _____
3. YES/NO Does the property owner or community allow German Shepherds to live on the property?
4. YES/NO Is anyone in the home allergic to dog hair or dander?
5. YES/NO Do you have a yard?
6. YES/NO If yes, is your yard fenced?
7. How would you categorize your outdoor area? (Circle one)
 - a. No yard
 - b. No physical fence at all
 - c. Backyard fenced area-Attached to back of the house with direct entrance to the house
 - d. Yard completely fenced-Fence goes completely around house and surrounding yard with direct entrance to the house

- e. Kennel area out in yard-No entrance to house
 - f. Other: _____
8. What type of fence do you have? (Circle one)
- a. Privacy (wood or plastic)
 - b. Chain link or Farm wire
 - c. Invisible or Underground
 - d. Concrete wall
 - e. Other: _____
9. What is the height of the fence? _____
10. YES/NO Can a dog dig out under your fence?
11. YES/NO I agree to allow MCGSR to visit my home as part of the approval process. I further agree to make any necessary changes before approval is granted.

Pet History Information

1. YES/NO Have you ever rescued a dog or cat before?
- a. If yes, where from and when? _____
2. YES/NO Have you ever returned, given up, or surrendered an animal before?
- a. If yes, when and why? _____
3. YES/NO Do you currently own any pets?
- a. If yes, what kind and how many? _____

 - b. If you have other dogs, what is/are their breed(s)? _____

4. YES/NO Are all animals in the home neutered or spayed?
5. YES/NO Are all animals in the home on flea and tick protection?
6. YES/NO Are all animals in the home on heartworm protection?
7. YES/NO Are there animals in the home you don't own?
- a. If yes, please explain? _____
8. Who is your current vet?
- a. Name: _____
 - b. Phone: _____

Future Dog Information

1. YES/NO Have you applied with any other rescue or shelter?
2. YES/NO Have you been approved to adopt with another rescue?
- a. If yes, which one? _____
3. How much time will the dog spend alone during the day? _____
4. YES/NO Is someone home during the day?
5. Will the dog be kept inside or outside? (Circle one)
- a. Inside only

- b. Outside only
 - c. Inside and Outside
6. How will you confine your new dog when it is outside? Select all that apply.
- a. Fenced yard
 - b. Chain/Tether
 - c. Leash
 - d. Perimeter train
 - e. Pulley run
 - f. Dog run/Cage
 - g. No confinement
7. Where will the dog be kept when you are not home? _____

8. Where will the dog be kept when you are home? _____

9. Where will the dog sleep? _____
10. What arrangements will be made for the dog if you travel? _____

11. Please select all the following items you have experience with.
- a. Leash training
 - b. Housebreaking
 - c. Socialization
 - d. Obedience training
 - e. Destructive behavior
12. Are you aware of basic vaccination and health needs of dogs? Select all you understand completely
- a. Distemper
 - b. Rabies
 - c. Parvovirus
 - d. Heartworm prevention
 - e. Flea/Tick prevention
 - f. Intestinal parasites/Deworming
 - g. Kennel cough (Bordetella)
 - h. Ear care
 - i. Dental care
 - j. Nail care
13. YES/NO Do you believe in obedience training your pet?
14. YES/NO Do you understand the benefits of obedience training?
15. YES/NO Do you know what socialized training is?
16. YES/NO Do you agree to attend a puppy or age-appropriate dog obedience class within the first 6 months of adopting your dog?
- a. YES/NO Do you agree to provide proof of obedience training?
17. YES/NO Do you understand the state laws on licensing of animals?
18. YES/NO Have you ever clipped dog toenails before?
19. YES/NO Have you administered medications to a dog before?
20. YES/NO Do you agree to have your new dog spayed/neutered if not already done?

a. YES/NO Do you agree to provide proof of spay/neuter as agreed upon in the Adoption Contract (if not yet spayed/neutered)?

21. YES/NO Do you have experience housebreaking a dog?

22. YES/NO Can you afford the ~\$1500+ a year costs to feed, license, medicate, and train your dog?

23. YES/NO Do you feel you are financially able to care for a new pet if an emergency should arise?

24. In case something was to happen to you, who would get custody of the dog?

a. Name: _____

b. Phone: _____

c. Relationship: _____

German Shepherd Experience

1. YES/NO Have you ever had a German Shepherd Dog before?

2. How well do you feel you understand the German Shepherd breed? (Circle one)

NONE LITTLE SOME WELL VERY EXPERIENCED EXPERT

3. YES/NO Are you familiar with food allergies common to German Shepherds?

4. YES/NO Do you know that German Shepherds shed more than dogs?

Dog Preference Information

1. Why do you want a German Shepherd?

a. _____

2. YES/NO Is there a specific dog you are interested in? (Selection does not guarantee adoption of the dog).

a. If yes, which? _____

3. Do you have any gender preferences? MALE FEMALE

4. Do you have any age preferences? (Select all that apply; age ranges are approximations)

PUPPY (up to 1.5 yrs) **ADOLESCENT** (1.5-4 yrs) **ADULT** (4-7 yrs) **SENIOR** (7+ yrs)

5. Do you have any color preferences? _____

6. Do you have any energy level preferences? (Circle one)

NONE LOW MEDIUM HIGH

7. YES/NO If approved for adoption, would you be interested in becoming a foster?

References

Please list 3 personal references (not family members) you have known for at least 3 years. We will contact them in reference to your relationship with animals.

REFERENCE 1-

NAME: _____

HOME PHONE: _____ **EMAIL:** _____

Effective (09-01-23)

REFERENCE 2-

NAME: _____

HOME PHONE: _____ EMAIL: _____

REFERENCE 3-

NAME: _____

HOME PHONE: _____ EMAIL: _____

Agreement

I understand that Macon County German Shepherd Rescue cannot guarantee that this pet will be perfectly suited to my family or my home, nor that they know everything about this pet when it is delivered to me. It is my job as the owner to provide training, love, and attention to my dog and to observe them for any unusual behaviors, health issues, or situations that would make them unsuitable to my home or family. If the dog has health issues, I agree to have them treated by my vet, and if I cannot treat the animal appropriately, I agree to return the dog to MCGSR immediately. If I am unwilling to address any medical or behavioral issues through training or veterinary care, then I agree to return the dog to MCGSR for rehoming. I agree to hold MCGSR harmless in any and all cases involving the dog I adopted regardless of the issue. These issues include, but are not limited to destruction of property, aggression toward people or pets, biting, or any medical problems. I further agree that if for any reason I cannot keep the dog, I will return the dog to Macon County German Shepherd Rescue.

By signing this agreement, you indicate that you have read and understood our agreement in its entirety and agree to abide by all of its terms and conditions. I certify that the information entered on this application is true. I affirm that I have full right and power to sign and be bound by this agreement, and that I have read, understand, and accept all of its terms. If electronically completed, by typing your name below, you are signing this document electronically. You agree that your electronic signature is the legal equivalent of your manual signature on this document.

Adopter Signature: _____ Date: _____

**PLEASE EMAIL COMPLETED APPLICATION TO
MACONCOUNTYGERMANSHEPHERDS@GMAIL.COM**