

Homeward Bound Pet Rescue
PO Box 4335 Irmo, SC 29063 803-454-9094

Application To Foster or Adopt A Pet

*Adopting or fostering a pet is a serious commitment.
This information will help us find the right pet for your family!*

Name Spouse/ Partner Roommate Name:

Address City State Zip Code

Phone(H) (W) (C)

E-mail

Occupation Employer

Age: _____

Please list three personal references and their relationship to you:

Name Relationship Phone

Name Relationship Phone

Name Relationship Phone

Your veterinarian and name of clinic:

Name Address City State Zip Code

May we call your veterinarian for a reference? Yes No Telephone Number

What is the name on the account your pet is/was seen under?

What is the name of the pet seen by this veterinarian?

Please describe the kind of dog you are interested in fostering or adopting:

Age Sex Breed/mix Size

If adopting, why would you like to adopt a dog? Companion Gift To Breed For a Child

As Guard Dog Companion for Another Pet Other _____

Will it be a working dog? Yes No Will it be a hunting dog? Yes No

I am comfortable training my dog to improve manners and reduce destructive behavior. Very Some Not at all

Please provide the following information about your pets (if any), your children (if any) and your home:

Your dogs:

Have you ever adopted from Homeward Bound? Yes No Type? Dog Cat Where is the pet now?

How many dogs do you have? Breed/mix Ages

How long have you had your current pet? Current pet's name?

If none, have you owned any dogs in the last 10 years? Where are they currently?

Did you: buy From breeder? From a store? Adopted from a shelter? Inherited? Rescued Other

Are pets spayed/neutered? Yes No If no, why not?

Are pets on heartworm preventative? Yes No What type:

Your cats:

How many cats do you have? Ages Do they get along with dogs?

Your home:

Number of adults? Own Rent Number of children? Ages Have they ever been afraid of dogs?

Landlord's name Telephone Number

If you rent, do you have written permission from your landlord to have a dog?

Do all adults in household know you wish to foster or adopt?

Do you live in: apartment duplex townhouse single house mobile home other

Yard info: Fenced? Yes No Type? privacy-all sides chain link-all sides underground height?

Your New Dog:

Explain how/where your dog will spend its days: _____

Explain how/where your dog will spend its nights? _____

If adopting, what will happen to your dog when you have to travel or have an emergency away from your home? *(Check everything that applies)* Pet sitter Family member will look after Board at kennel Will take with me
 Leave in yard Leave in house Other: _____

How many hours do you leave your pets alone each day? 2-4 4-6 6-8 8-10 10-12 12-14 14+

If adopting, under what circumstances might you consider giving up your pet? *(Check everything that applies)*

Moving Baby Not Getting Along with Other Pets Behavioral Problems Children Lost Interest
 Too Time Consuming Allergies Separation/Divorce Medical Problems Other _____

If adopting are you willing to make a 10-15 year commitment for this animal? Yes No

If adopting, are you financially able to provide monthly heartworm prevention for your pet and will you commit to do so? Yes No

Home visit. I/we agree to allow you to visit my/our home by appointment as part of our application or your follow-up process. Yes No

Application Information. All of the information I/we provided in this application is true and correct. If any of the information changes, I/we will advise you promptly. Yes No

Date:

Signature