

AFGHAN HOUND RESCUE - ADOPTION APPLICATION

AFGHAN HOUND CLUB OF AMERICA

Please do not edit, delete or modify the questions on this form. Answer all questions candidly or, if not applicable, mark them N/A. Please complete the entire form and **return it to:**

Martha Powell
251 Warwick Lane
Alabaster, AL 35007
E-mail: AffieRescue@aol.com

Or

TO THE RESCUE PERSON WITH WHOM YOU ARE WORKING

Name: _____

Address: _____

City/County/State/Zip _____

Work Phone: _____ Home Phone: _____

Email: _____

Do you rent/own? _____

Previous address if less than three years at present address:

How long at previous address? _____

Do you live with a relative/roommate? _____

How many people are living in your home? _____

What ages and genders? _____

Have you ever owned an Afghan hound? _____ How long? _____

Why do you want to adopt an Afghan hound? _____

Do you currently own any other pets? _____ If "yes," what kind and what are their histories:

How old are your pets? _____

Are they spayed/neutered? _____ Declawed? _____

What kind of temperament do they have? _____

Do they get along well with other animals? _____

If you have had pets in the past, please list the kind here:

What happened to your last pet(s)? (i.e. died, put down, ran away, etc.) Please explain the circumstances: _____

Do you have a fenced yard? _____ if "yes," please describe the type of fencing (i.e. split rail, chain link, stockade) as well as the height and the size of the yard:

May we visit your home? _____

How will you exercise the dog? (i.e. walks in the park, jogging with you, on a treadmill, running the dog in a fenced yard or other secure area, etc.) _____

Where will the dog spend the majority of its time? (i.e. in a kennel building, outside, in the house, etc.) _____

Where will the dog sleep? _____

Who will be primarily responsible for the care of the dog? (i.e. you, your spouse/significant other, child(ren), roommate, etc.) _____

Are you willing to assume responsibility for all medical care for this dog including annual preventative care, heartworm prevention, etc.? _____

Do you understand that your donation to Rescue may cover expenses which Rescue incurred to provide spay/neuter, well-checks and shots for your pet? _____

Are you willing to accept responsibility for an Afghan hound that may need additional training perhaps for housebreaking, barking, lead training, chewing, etc.? _____

What correction methods will you use for inappropriate behavior? _____

Do you have a preference of sex/age/color/behavior characteristics? If so, please indicate. _____

If you would like to consider any rescue Afghan hound, just answer "None" above.

What sort of Afghan hound do you prefer? (Active, Sedentary, Mellow, Athletic, etc.)

How would you describe your lifestyle? Active, sedentary, etc.? Please explain. _____

How often do you travel? _____

If you travel, who will care for your dogs when you are away? (Boarding,

Kennel, Neighbor, etc.?) _____

Please give the name/address/phone number your veterinarian(s).

Name: _____

Address: _____

Phone: _____ Years Acquainted: _____

May we contact your veterinarian? _____

Please provide the names/addresses/phone numbers and e-mail of two references who know of your pet ownership and who we may contact:

1) Name: _____ Relationship _____

Address: _____

Phone: _____ Years Acquainted: _____

E-mail: _____

2) Name: _____ Relationship _____

Address: _____

Phone: _____ Years Acquainted: _____

E-mail: _____

Is there any other information that you would like for us to consider as we review your application? _____

I understand AHCA Rescue retains the unconditional right to reclaim any Afghan hound placed with me, and will fully comply with such a request if made. I further pledge that, should I find I no longer wish to keep said dog or should I no longer be able to properly care for same, I will return the dog to AHCA Rescue or its representative. I affirm that the information provided is true, complete, and correct to the best of my knowledge.

Signature: _____

Date: _____

County of _____

State of _____