



**Oregon**  
**KEESHOND RESCUE & RAILROAD**  
**Application to adopt a keeshond**

**What dog are you interested in adopting?** \_\_\_\_\_

Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Work Hours: \_\_\_\_\_ Employer: \_\_\_\_\_  
Attend School \_\_\_\_\_  
Other: \_\_\_\_\_  
Housing Own \_\_\_\_ Rent \_\_\_\_  
Is it an Apartment . \_\_\_\_ Condo \_\_\_\_ House \_\_\_\_

Please use as much space as needed for all fill-in answers.

**Who will be responsible for:**

Feeding \_\_\_\_\_  
Exercise \_\_\_\_\_  
Vet Care \_\_\_\_\_  
Training \_\_\_\_\_

**Pets I (we) have owned:**

**DOGS**

Breed \_\_\_\_\_ Name \_\_\_\_\_ Sex \_\_\_\_\_ Altered \_\_\_\_\_  
Breed \_\_\_\_\_ Name \_\_\_\_\_ Sex \_\_\_\_\_ Altered \_\_\_\_\_  
Breed \_\_\_\_\_ Name \_\_\_\_\_ Sex \_\_\_\_\_ Altered \_\_\_\_\_

**What happened to your last dog?**

**Are all dogs are current on shots?**

**Are all dogs on heartworm preventative and/or checked annually?**

**CATS**

Breed \_\_\_\_\_ Name \_\_\_\_\_ Sex \_\_\_\_\_ Altered \_\_\_\_\_

Breed \_\_\_\_\_ Name \_\_\_\_\_ Sex \_\_\_\_\_ Altered \_\_\_\_\_

Breed \_\_\_\_\_ Name \_\_\_\_\_ Sex \_\_\_\_\_ Altered \_\_\_\_\_

**Are all cats current on all required shots and annual checkups?**

**Other pets I (we) have owned: (Please specify)**

\_\_\_\_\_  
\_\_\_\_\_

**Veterinarian used in the past five years :**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

We will ask this vet for a reference.

Please answer all the questions below. There are no "right" or "wrong" answers, and there are no "trick" questions.

**I want to adopt a rescue Keeshond because:**

\_\_\_\_\_  
\_\_\_\_\_

**Why do you want a Keeshond?** \_\_\_\_\_

**Who will have ownership of this dog and what is the relationship to the applicant?** \_\_\_\_\_

**Who lives in your household? Please provide names and ages of all occupants, including pets.**

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**Will the dog be kept primarily indoors or outdoors?**

**How will the dog receive exercise?**

**When you are away (vacations, business travel, etc.) what will happen to your dog?**

Travel with you on trips? Yes or No (circle one)

Kennel? Yes or No (circle one)

Dog sitter? Yes or No (circle one)

Other: \_\_\_\_\_

**In what dog activities will the dog participate?  
(Examples: obedience, agility etc.)**

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**My Keeshond will be alone (with no humans):**

\_\_\_\_\_ hours a day \_\_\_\_\_ days of the week

**Estimate the yearly expenses for a dog (food, vet visits, city license)**

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**If you move in the future, what will happen to your pets?**

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**Are you willing to take a dog for regular (yearly) veterinarian visits and keep current on appropriate vaccinations?**

**Do you know to care for a dog's coat and trim its nails?**

**Are you aware that a Keeshond has a heavy coat, sheds seasonally, is relatively active for its size, may bark to protect "his territory" and may dig holes?**

**Do any household members have allergies?**

**If yes, indicate to what** \_\_\_\_\_

**My Keeshond will not be permitted in certain parts of the house?**

**My Keeshond will be allowed on furniture?**

**Are you familiar with the use of crates?**

**Are you willing to use a crate, if necessary?**

**Are you interested in doing obedience work with your Keeshond?**

We require a home check by a current Keeshond Rescue member before all placements. **Please initial here** : \_\_\_\_\_ to show that you have read this requirement and agree to allow a home check and reasonable follow-up visits.

**Provide three personal references that can attest to your interest, interaction, and feelings about animals in general and dogs in particular:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**I UNDERSTAND THERE IS A NONREFUNDABLE MONETARY DONATION REQUIRED AT TIME OF ADOPTION:**

(write in Yes or No and initial) \_\_\_\_\_

I understand and agree that if I am, at any time in the future, unable to care for my adopted dog, that dog is to be returned to the person or persons from whom it was obtained. In the event that that is impossible, the dog **MUST** be returned to Keeshond Rescue. The dog may not be abandoned, given or sold to anyone else, or turned over to any shelter, pound, humane society or similar organization. **Please initial to indicate your acknowledgement and agreement with this clause.** \_\_\_\_\_

By signing below, I certify the information provided by me is true to the best of my knowledge and I recognize that any misrepresentation of that information will result in my losing the privilege of adopting a rescue Keeshond. I understand that Keeshond Rescue has the right to deny my request to adopt a Keeshond, and I authorize checking of all information provided in this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_