

THE CHAKO RESCUE ASSOCIATION FOR THE AMERICAN PIT BULL TERRIER

APPLICATION TO ADOPT A DOG

Legal Name: _____

Have you been known by other names (if so, please list): _____

Your Date of Birth: _____ Phone: _____

Address: _____

Have you ever been convicted of a crime? (circle one): yes no

If you circled yes to above, please describe:

Do you currently own or rent your home? _____

If you rent, give the name, address, and telephone number of your landlord or property management company: _____

How many people are in your household? _____

Please list the names and phone numbers of two references (at least one professional like a veterinarian, supervisor, etc.):

1. _____

2. _____

What current pets do you own and are they spayed/neutered or intact?

Do you have children? (if so, how many and what are their ages):

If you do not have children but plan to, do you intend to keep the dog after you have children?

We believe dogs that demonstrate dangerous propensities toward people should be euthanized. Will you euthanize a dog that displays inappropriate aggression toward people?

Do you agree to allow a representative of the CRA to inspect your home and perform a follow-up surprise home inspection?

Are you currently employed?

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What is the name of your employer?

Where will the dog be when you're working?

Where will the dog sleep?

What is the name and phone number of your current veterinarian, if you have one?

Have you ever owned a dog before?

If you have owned a dog before, how long ago?

How many dogs have you owned total in your life?

If you have owned a dog before, but do not have that dog now, what happened to that dog? (list all):

If you own your home, does your insurance company exclude coverage for Pit Bulls?

Are you willing to switch home insurance companies, even if you end up paying more, to have a company that will give you coverage even though you own a Pit Bull?

If you move in the future and have difficulty finding a place that will accept "Pit Bulls," what will you do?

By signing below, I attest to the truth of the information above and I authorize Dawn Capp and/or The Chako Rescue Association to perform a criminal background check on me.

Print your name: _____ Date: _____

Your signature: _____