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| C:\Users\lduck\Pictures\LTRLOGO.png **Lucky Tales Rescue Application** |
| This application will be reviewed by an adoption counselor and our adoptions committee. LTR reserves the right to deny any applicant.Our Adoption committee will review all references. We require two personal references as well as a vet reference before your application will be processed. (Please do not submit an application without references).If you application is approved, our adoptions counselor will reach out to you about setting up a home visit. All family members who will live with the dog need to be present at the time of the home visit. Our adoption’s team will respond to your email/application within 24 hrs. We strive to have all applications processed within 72 hours—but timing is dependent on us reaching your references. **\*\*PLEASE CALL YOUR VET TO GIVE CONSENT FOR US TO GET YOUR CURRENT/PAST PET’S HISTORY\*\*** |
| Dog’s Name: |  |
| **APPLICANT INFORMATION** |
| Applicant Name and Age: |  |
| Driver’s License Number: |  |
| Co-Applicant Name and Age: |  |
| Full Address: |  |
| Years at this Residence:--If less than one year, please list prior address |  |
| Home Phone Number: |  |
| Cell Phone Number: |  |
| Employer #1: |  |
| Employer #1 Position: |  |
| Employer #2: |  |
| Employer #2 Position: |  |
| Indicate type of Property By Highlighting Below:HOUSETownhouseApartmentCondoMobile HomeOther (Please Explain): |
| Do you rent? |  |
| Landlord/Complex Name & Number: |  |
| Do you have a Fenced Yard? |  |
| Type of Fencing: |  |
| **HOUSEHOLD INFORMATION** |
| Number of Adults in the Household: |  |
| Number of Children in the Household:--Please list ages |  |
| Is anyone allergic to animals?--If so, what type of animals? |  |
| Who will be the primary caregiver? |  |
| If you had to move, what would you do with your pet? |  |

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| **PET OWNERSHIP** |

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| NAME | BREED | AGE/SEX? | ALTERED? | DECLAWED? | DECEASED? | WHERE ARE THEY NOW? |
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| Name and Phone number of your vet:**\*\*PLEASE CALL YOUR VET TO GIVE CONSENT FOR US TO GET YOUR CURRENT/PAST PET’S HISTORY\*\*** |  |
| When was your last visit? |  |
| Number of pets you have had as an adult: |  |
| Have you adopted from LTR in the past? If yes, where is that pet now? |  |
| How long have you been looking for a dog? |  |
| Describe your ideal dog (what kind of activities do you want to do with your dog): |  |
| Why do you want to adopt? |  |
| What kind of pet are you looking for? Indoor/Outdoor (explain):  |
| Where will the dog be when you are home? |  |
| Where will the dog be when you are not home? |  |
| Where will the dog be when you are asleep? |  |
| How many hours a day will your dog be alone? |  |
| How many hours without an adult? |  |
| How will your dog spend his/her days? Please highlight all that apply below:LOOSE IN THE HOUSE GarageLoose in the yard Cage/crateFenced yard PorchDoghouse BarnOn a chain Confined to one roomBasement Other (Explain): |
| How will your dog spend his/her nights? Please highlight all that apply below:LOOSE IN THE HOUSE GarageLoose in the yard Cage/crateFenced yard PorchDoghouse BarnOn a chain Confined to one roomBasement Other (Explain): |
| How will you introduce your new dog to other pets in the home? |  |
| How will you entertain/exercise your dog? |  |
| How much time are you prepared to allow for your new dog to adjust to your home? |  |
| Do you expect and lifestyle changes in the next 2 years? (new job, new address, marriage, divorces, new baby, caring for relatives)If yes, please explain: |  |
| Have you ever had to turn an animal into a shelter?If yes, please explain: |  |
| How will you house train your new dog? |  |
| Are you familiar with crate training? |  |
| Will you consider a dog crate if needed?If no, why? |  |
| Under what circumstances would you not keep or would you return this dog? (moving, allergies, obedience, etc.) |  |
| Are you prepared to assume the costs of providing your dog with food, training, toys, routine, and emergency car, etc. (Approx. $1,000 per year or more)? |  |

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| **PERSONAL REFERENCES** | Please list 2 references (one must be someone not related to you): |
| **Name** | **Phone Number** | **Relationship** |
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*By my signature, I certify that the above information is complete and correct and that I am at least 21 years of age. I realize that any misrepresentations of fact may result in my losing the privilege of adopting an animal. I understand that LTR has the right to deny my request for adoption. I authorize verification of all statements on this application, including but not limited to prior vet medical history. I understand that this application is the property of LTR, who reserves the right to retain this information for their own use. I also agree that a LTR representative shall visit my home by appointment as part of this application process.* Signature DatePRINT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_