



SAVING GEORGIA DOGS ONLINE ADOPTION APPLICATION

NOTE: You must be over 21 to submit an application with SGD

Date: _____

Dog's Name: _____

CONTACT INFORMATION

First Name: _____

Last Name: _____

Address1: _____

Address2: _____

City: _____

State: _____

Zip: _____

Daytime Phone: _____

Evening Phone: _____

Email: _____

Spouse's name: _____

HOUSEHOLD INFORMATION

Please indicate how many of the following live in your household:

Adults (over 18): _____

Children (under 18): What are their ages?

Are all members of the household in agreement about adopting a dog? _____ Yes _____ No

Do you rent or own? _____ Rent _____ Own

If you rent, please provide landlord's name and phone number so we may verify that you are allowed to have pets: _____

Please describe your home. Apartment, single family detached, duplex, etc. Do you have a backyard? If so, is it fenced in? What height is the fence?

Please note that a fenced-in yard is NOT a requirement for adoption unless specifically stated in the dog's description.

EXPERIENCE

Please note that experience with dogs is NOT a requirement for adoption unless specifically stated in the dog's description.

Have you ever lived with a dog before? _____ Yes _____ No

If yes, please describe your experience(s) and a brief history of what happened to the dog(s). If your last dog died, please state dog's name and date deceased. Has your dog ever produced puppies?

Have you ever given a dog up to a shelter or rescue organization? _____ Yes _____ No

Do you currently have any animal companions at home? _____ Yes _____ No

If yes, please indicate type of animal and how many:

CARE OF THE DOG

How do you plan to have your new dog relieve itself?

Do all adults work full time? _____ Yes _____ No

How many hours each day will your new dog be alone? _____

How many hours each day will you spend time with your dog? _____

Where will your new dog be kept when it is alone? _____

Where will your new dog sleep? _____

What sort of training do you plan on providing the dog? _____

REFERENCES

Please provide your veterinarian's name and phone number (if you have one). We will call them as a reference. If you do not have a veterinarian, please provide the name and number of a non-family member that we may contact. _____

Finally, please be advised that SGD asks for a donation of between \$125.00 per adoption to help defray medical and rescue effort costs. Is this acceptable? _____ Yes _____ No

Please realize that dogs need vet care throughout their lives, including yearly boosters, heartworm and flea/tick preventive meds, etc. If you cannot afford a donation, can you afford the appropriate vet care? Please consider this before adopting. Is there anything additional you'd like us to know about your needs or circumstances?

Applicant Signature:

Date:
