

East Coast Adoption Agency - Adoption Application



Thank you for your interest in adopting one of our dogs!

Please check our homepage to see if the dog you are interested in is still on there. Some websites our dogs are posted on don't delete them as quick as we do.

PLEASE NOTE: It's possible that the dog you are interested in may have a pending adoption. Feel free to list multiple dogs names you'd be interested in, just in case.

To start the process, we'll need you to fill out this multi-part application. It may seem like we are asking for a lot of information and we do. But only to ensure all of our dogs end up in the best forever home possible.

When you are approved for adoption and you come to pick up your dog, we require that an adoption waiver be filled out for every dog.

After completing this application you can mail it to us at the address below or, you can scan it and email it to sarah@eastcoastadoptions.com

Mail To: East Coast Adoption Agency
P.O. Box 913
Sherburne NY 13464

Email to sarah@eastcoastadoptions.com

visit us on the web: <http://eastcoastadoptions.com>

East Coast Adoption Agency - Adoption Application

Name _____ Address _____

Email _____

Phone _____ City _____ State _____ Zip _____

Your Age _____ Employer _____

Reason For Adoption Please tell us why you want to adopt a dog at this time

Do you rent or own your residence? Renters must have their landlords permission to have a dog.

Rent Own

Dogs Name - Please tell us what dog you are interested in. _____

Where is the dog located - Who is the foster? _____

Breed _____

Breed Knowledge - Do you have any experience with this particular breed of dog?

House Training - If you are applying for a puppy/dog who is not house trained, how will you house train the dog?

What Situations Would Require You To Return The Animal?

Describe the kinds of personal situations where you might have to return your adopted dog, i.e., job loss, children, move, marital change, etc. PLEASE NOTE: East Coast Adoption Agency has a strict NO REFUND policy.

Do you or any family member have any allergies?

Yes No

Do you have children in the home?

Yes No

Are there other animals in the household?

Yes No

Childrens Age(s) _____

Care - Who will take care of the dog in the absence of the primary caretaker?

East Coast Adoption Agency - Adoption Application Part 2

Pet Care - Please list each vet or animal hospital where your pet(s) have received care over the past 5 years.

Your Veterinarian Information - Name, Address, Phone Number

Pick-Up - If your application is approved, when is the earliest date you would be able to take your dog home?

____/____/____

Local Laws - Are you familiar with your local animal control laws? Yes No

Have ALL family members and/or other people that live in your home agreed to the adoption of a dog? Yes No

I understand that these are rescued dogs that come from sometimes neglectful situations.

I understand that although we (East Coast Adoption Agency) try our best to take precautions in ensuring they are healthy, there is no health guarantee and that there are no refunds.

**I understand that I have the option of signing up for the free health insurance we provide.
I understand that It is recommended that I get my own as well, just in case!**

I understand and agree that I have to drive to pick up him/her myself if approved.

I understand and agree that East Coast Adoption Agency does not "hold" dogs for potential adopters?

I understand that by my submitting this application I am not guaranteed nor does **East Coast Adoption Agency** promise to provide me with the dog of my choice.

I Agree that I may be declined for any reason and that adoption approval is at the sole discretion of the foster **AFTER** I have had the opportunity to meet the dog.

By signing my full name below, I certify that the the information I have provided is true and correct.

Signature

Date

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