Golden Gate Pembroke Welsh Corgi Fanciers, Inc.

Rescue Adoption Application

The answers you give on this application will help us to find the best possible match between you and the dogs available through GGPWCF. Please fill out both this and the Terms of Adoption forms completely and return to the address at the end.

Name _____ Home Phone (___) _____

Street Address _____ Alternate Phone (___) _____

City _____ State _____ Zip _____ E-Mail _____

Best time to call _____ Occupation _____

Personal reference: Name _____ Phone (___) _____

Relationship _____ How long known? _____

Do you live in a (circle)   House   Apt   Mobile Home   Condo   Other (fill in) _____

Do you (circle) own or rent your home: If renting, do you have your landlord's permission to have a dog? _____

Landlord's name _____ Landlord's phone (___) _____

How long have you been at this address?_____

Do you have a fenced yard? List fence height and type _____

If no fence, how will you handle exercise and toilet duties? _____

Do you have a separate kennel run? _____ List height and size _____

How many adults in the household? _____ How many children? _____

Age and sex of children? _____

Are there regular visitors to your home (human or animal) with which your dog must get along? _____

Please provide a brief description _____

_____

Do you own other dogs? _____ Are they neutered? _____

Give breed/type, sex, and age of each _____

Do you own cats? _____ How many? _____ Any other animals? _____

Do you have a regular vet? _____ Vet's name _____

Vet's clinic, city, and phone number _____

How many dogs have you owned in the past 5 years? _____

Give breed/type(s) and if you still have the dog(s) _____

If not, what happened to the dog(s)? Be specific _____

_____

Have you owned a Pembroke Welsh Corgi before? _____

Why did you choose this breed?_____

List all plans for this dog (circle)   Pet   Obedience   Rally   Herding   Agility   Other _____

Would you prefer a male or female? (circle)   Male   Female   No Preference

Color preference? (circle)   Red/White   Sable   Tricolor   No Preference

Acceptable age range? (circle)   Puppy   2-5 yrs   5-8 yrs   8+ yrs   No Preference

Coat type preferred (circle)   Regular   Fluffy   No Preference

I would be willing to consider a suitable dog of a different (circle)   Sex   Color   Age   than that above.

I would be willing to accept a special needs dog (e.g., diabetic; allergies; needs training, special food or medication, etc.)   Yes   No   Comment _____

Where will the dog spend the day? (circle)   Loose indoors   Crate   Basement   Garage

    Fenced Yard   Loose outdoors   Tied Out in Yard   Kennel Run   Other _____

How many hours, on average, will the dog spend alone per day? _____

Where will the dog spend the night? (circle)   Loose indoors   Crate   Basement   Garage

    Fenced Yard   Loose outdoors   Tied Out in Yard   Kennel Run   Other _____

Are any family members allergic to dogs? _____ Describe _____

Do all family members want to adopt a dog? _____ If no, describe _____

Do you understand that GGPWCF requires all dogs to be neutered? _____

Do you agree to license an adopted dog and give regular health care? _____

Do you agree to contact GGPWCF if you can no longer keep the dog? _____

Would you be willing to let a representative of GGPWCF visit your home by appointment? _____

If no, why not? _____

How did you hear about GGPWCF Rescue _____

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All of the information I have given is true and complete. Should an unneutered dog be placed with me, I agree to have it neutered within one month of adoption or by a date agreed upon by me and a representative of GGPWCF. This dog will reside in my home as a pet. I will provide it with adequate food, water, shelter, training, affection, and medical care. I understand that GGPWCF is a referral service and is not responsible for the accuracy of information received about the temperament, habits, or physical condition of dogs available to adoption. I understand it is my responsibility to see and evaluate the dog for myself before agreeing to adopt it. I am in full agreement with these terms for adoption. GGWPCF is in no way liable or responsible for any damage, accident, or injury resulting from the placement of a dog into my household.

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Applicant Signature	Guardian signature if applicant is under 18 years of age	Date

WE RESERVE THE RIGHT TO REFUSE ANY APPLICANT
Please mail this and Terms of Adoption forms to:
PWC Rescue Coordinator, GGPWCF
P.O. Box 452.
Livermore, CA 94551