

## Milagro NM BOSTON TERRIER RESCUE: APPLICATION FOR ADOPTION

The following information is necessary so that we can assist you in the selection of a new dog.

This form and a consultation with a NMBTR representative are designed to help you find the dog most compatible with your lifestyle.

In order to be considered as an adopter you must:

- Be 21 years of age or older
- Have identification showing your present address
- Have the knowledge and consent of your landlord
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet.

Completion of this application does not guarantee adoption of a Milagro NMBTR dog.

Date: \_\_\_\_\_ Name or type of pet applying for: \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail Address (If Available): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Employer Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Spouse's Name/Employer: \_\_\_\_\_

Spouse's Work Phone: \_\_\_\_\_

Reference – local friend or relative: Name/Phone: \_\_\_\_\_

1. List ALL pets owned (past & current) in the last five years:

TYPE	SEX	AGE	SPAYED/NEUTERED	WHAT HAPPENED TO IT?

- 1a. If NONE, have you ever owned this type of pet? \_\_\_\_\_ How long ago? \_\_\_\_\_
2. Why do you want to adopt this animal? Please check all that apply:  
 \_\_\_\_\_ Guard Dog \_\_\_\_\_ Mouser \_\_\_\_\_ Gift \_\_\_\_\_ To Breed \_\_\_\_\_ Personal  
 \_\_\_\_\_ Protection \_\_\_\_\_ Other \_\_\_\_\_ For Children \_\_\_\_\_ Companion
3. How many adults are in your family or house? \_\_\_\_\_ Children? \_\_\_\_\_  
 Ages of Children: \_\_\_\_\_
4. If there are no children, do you expect that to change during this pet's lifetime? \_\_\_\_\_
5. Do all of the adults in the home know that you will be bringing home a new pet? \_\_\_\_\_
6. Who will be responsible for feeding, housebreaking & training? \_\_\_\_\_
7. Does any member of you family have allergies to animals? \_\_\_\_\_
8. Is someone home during the day? \_\_\_\_\_ Who? \_\_\_\_\_
9. How many hours will this pet be alone during the day? \_\_\_\_\_
10. When I am home, this pet will be kept (please check all that apply): \_\_\_\_\_ House \_\_\_\_\_ Crate  
 \_\_\_\_\_ Garage \_\_\_\_\_ Basement \_\_\_\_\_ Yard \_\_\_\_\_ Outdoor kennel \_\_\_\_\_ Tie out
11. When I am away during the day (example, for work), this pet will be kept (please check all that apply): \_\_\_\_\_ House \_\_\_\_\_ Garage \_\_\_\_\_ Basement \_\_\_\_\_ Yard  
 \_\_\_\_\_ Outdoor kennel \_\_\_\_\_ Tie out \_\_\_\_\_ Crate
12. When I am away in the evening (example, going out to dinner), this pet will be kept (please check all that apply): \_\_\_\_\_ House \_\_\_\_\_ Garage \_\_\_\_\_ Basement \_\_\_\_\_ Yard  
 \_\_\_\_\_ Outdoor kennel \_\_\_\_\_ Tie out \_\_\_\_\_ Crate
13. Where will this pet sleep (be as detailed as possible, please)? \_\_\_\_\_
14. Do you live in a (please check all that apply): \_\_\_\_\_ House \_\_\_\_\_ Townhouse \_\_\_\_\_ Condo  
 \_\_\_\_\_ Apartment \_\_\_\_\_ Duplex \_\_\_\_\_ Mobile Home Do you: \_\_\_\_\_ Own \_\_\_\_\_ Rent

Landlord's name and phone number: \_\_\_\_\_

15. DOG ADOPTERS:

Do you plan to take this dog through obedience classes? \_\_\_\_\_

Have you ever taken a dog through obedience classes? \_\_\_\_\_

If required with adoption, are you willing to attend a training class or session? \_\_\_\_\_

What are your feelings about crate or kennel training?

Do you have a fenced yard? \_\_\_\_\_ Yes \_\_\_\_\_ No What type? \_\_\_\_\_

Height at lowest point? \_\_\_\_\_

If NO, how will you keep your pet at home? \_\_\_\_\_

Will your dog ride in the back of a pick-up truck? \_\_\_\_\_ Yes \_\_\_\_\_ No

How will the dog ride? \_\_\_\_\_

Where will your dog sleep? \_\_\_\_\_

16. Which reasons are acceptable reasons for giving up your pet(s)? Please check all that apply:

- |                                     |                            |                     |                  |
|-------------------------------------|----------------------------|---------------------|------------------|
| _____ Fence jumping                 | _____ Moving               | _____ Illness       | _____ Biting     |
| _____ Puppy/Kitten                  | _____ Chewing              | _____ Stealing Food | _____ Allergy    |
| _____ Destructiveness               | _____ Growling             | _____ Spraying      | _____ Scratching |
| _____ Housebreaking Accidents       | _____ Showing Teeth        | _____ Too Active    |                  |
| _____ Compatibility with other pets | _____ Hides for first week |                     |                  |

17. Have you ever had to give up a pet? If yes, When and Why? \_\_\_\_\_

18. It may take your new pet a month (or longer if other pets are involved) to adjust to its new home. What will you do if your pet displays undesired behavior (see #17 for examples) during this adjustment time?  
\_\_\_\_\_

19. If you have a pet now, who is your veterinarian? \_\_\_\_\_

20. How much time will you spend with this pet each day? \_\_\_\_\_

21. What will you do with the pet during this time? \_\_\_\_\_

22. Are you familiar with local animal control laws & ordinances? \_\_\_\_\_

23. Do you plan to let your pet have puppies or kittens? \_\_\_\_\_

24. How do you feel about having this animal spayed or neutered? \_\_\_\_\_
25. Do you know that dogs/cats require yearly vaccinations? \_\_\_\_\_
26. If you go away for a few days, who will care for this pet? \_\_\_\_\_
27. If you can no longer care for this pet, what will you do with it? \_\_\_\_\_
28. Do you plan to place personal ID tags on your pet? \_\_\_\_\_
29. How long do you expect to keep this pet? \_\_\_\_\_
30. We require a home visit prior to final adoption approval. Is a home visit authorized? Also, you will get a follow-up call(s) or home visit(s) after adoption from a NMBTR representative to make sure everything is going well with your new pet. Will this be a problem? \_\_\_\_\_

By signing below, I certify that the above information is true. I further certify that I am financially and physically able to care for this animal. I understand that proper food and veterinarian care can be costly and I am able to meet these obligations. I understand that home checks may be made on a random basis prior to or following adoption. If any information contained in this application is found to be false, I understand the animal will be removed from my premises without a refund of monies paid.

**I have read and fully understand the terms and conditions of this Agreement, and agree that it is not arbitrary and that the provisions herein are common in pet adoption contracts.**

Name:	
Address:	
Phone:	
Signature:	Date:

***Please return completed Adoption Contract to:  
Milagro New Mexico Boston Terrier Rescue  
By email: [mitzidhobson@gmail.com](mailto:mitzidhobson@gmail.com)***

If you appreciate the work we do for our dogs,  
please consider a donation to Milagro Boston Terrier Rescue.  
All medical bills, shelter fees, and money for food and transports  
Are funded by the generosity of our adopters and volunteers.  
We also welcome the donation of your time in fostering,  
transporting or volunteering.