## 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	te 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	a. If NONE, have	you ever owned this	type of pet?		ł	How long ago?
2.	<ol><li>Why do you want to adopt this animal? Gift</li></ol>		Companion	Guard Dog	Mouser	
	To Breed Pe	ersonal Protection	For Children	Other		
3.	How many adul	ts are in your family o	or house?	Children? _	Ages of Child	dren
4.	If there are no o	children, do you expe	ct that to chan	ge during this	s pet's lifetime	?
5.	Do all of the ad	ults in the home know	w that you will	be bringing h	ome a new pe	et?
6.	Who will be res	ponsible for feeding,	housebreaking	g & training?		
7.	Does any mem	ber of you family hav	e allergies to a	animal?		
8.	Is someone home during the day Who?					
9.	. How many hours will this pet be alone during the day?					
10.	10. When I am home, this pet will be kept: House / Garage / Basement / Yard / Outdoor kennel					
	/ Tie out / Crate					
11.	. When I am aw	ay during the day	(example, for	work), this p	oet will be ke	pt (circle your
	responses):					
	House / Ga	arage / Basement / Y	ard / Outdoor	kennel / Tie c	out / Crate	
12.	. When I am awa	ay in the evening (ex	ample, going	out to dinner)	), this pet will	be kept (circle
	your responses	):				
	House / Ga	arage / Basement / Y	ard / Outdoor	kennel / Tie c	out / Crate	
13.	. Where will	this pet sleep	(be as	detailed as	s possible,	please) ?
14.	Do you: Own /	: House / Townhous Rent (circle your re e and phone number	esponses)			Home
-	Have you ever the lf required with the line of the lin	RS: take this dog through taken a dog through with adoption, are	obedience cla: e you willin	sses?_ ig to atter	nd a trainii	ng class or

What are your feelings	about crate or	kennel training	?			
Do you have a fenced yard? Yes/No If NO, how will you keep your pet at home? Will your dog ride in the back of a pick-up truck? Where will your dog sleep?				How will the dog ride?		
16. Which reason responses)?	s are accept	able reasons f	or giving up	your pet(s)	(circle your	
Fence jumping Mo	oving	Illness	Biting	Puppy/Kitten		
Destructiveness Ch	newing	Stealing Food	Allergy	Growling		
Housebreaking Acc	idents	Spraying	Showing Tee	eth Too	Active	
Scratching Co	mpatibility with	h other pets				
Hides for first week						
17. Have you ever had	to give up a pe	et? If yes, Wher	and Why?			
-	home. What will you do if your pet displays undesired behavior (see #16 for examples) during this adjustment time?					
19. If you have a pet no	9. If you have a pet now, who is your veterinarian?					
20. How much time will	). How much time will you spend with this pet each day?					
21. What will you do wit	1. What will you do with the pet during this time?					
22. Are you familiar with	2. Are you familiar with local animal control laws & ordinances?					
23. Do you plan to let y	our pet have p	ouppies or kittens	s?			
24. How do you feel ab	4. How do you feel about having this animal spayed or neutered?					
5. Do you know that dogs/cats require yearly vaccinations?						
6. If you go away for a few days, who will care for this pet?						
27. If you can no longer	7. If you can no longer care for this pet, what will you do with it?					
28. Do you plan to plac	. Do you plan to place personal ID tags on your pet?					
29. How long do you ex	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

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 is funded by the generosity of our adopters and volunteers. We also welcome the donation of your time in fostering, transporting or volunteering.