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ADOPTION APPLICATION

DOG INTERESTED IN ADOPTING

PERSONAL INFORMATION

Surname	<input type="text"/>					
First Name/s	<input type="text"/>					
Identity Number	<input type="text"/>					
Marital Status	Married	Divorced	Single	Widowed	Engaged	Other
Specify	<input type="text"/>					
Physical Address	<input type="text"/>					
Occupation	<input type="text"/>					
Average household income	<input type="text"/>					

CONTACT DETAILS

Cell	<input type="text"/>	Home	<input type="text"/>
Work	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>		

WHO LIVES AT THE ABOVE ADDRESS?

Name	<input type="text"/>	Sex	<input type="text"/>	Age	<input type="text"/>
Name	<input type="text"/>	Sex	<input type="text"/>	Age	<input type="text"/>
Name	<input type="text"/>	Sex	<input type="text"/>	Age	<input type="text"/>
Name	<input type="text"/>	Sex	<input type="text"/>	Age	<input type="text"/>

Is there anyone at home during the day? Yes No

Please specify?

Please describe your house? Active Noisy Quiet Average

WHY DO YOU WANT TO ADOPT?

<input type="checkbox"/> Breeding	<input type="checkbox"/> Companionship	<input type="checkbox"/> Family Pet
<input type="checkbox"/> Working Dog	<input type="checkbox"/> Search and Rescue	<input type="checkbox"/> Guard Dog

ABOUT YOUR HOME

Do you Rent?

Yes	No
-----	----

Do you Own?

Yes	No
-----	----

How long have you lived at your current address?

Do you have permission to keep pets?

Yes	No
-----	----

Should you rent then a written letter of confirmation from the Landlord / Body Corporate must accompany your application, confirming that the tenant is allowed to keep such an animal on the premises.

TYPE OF DWELLING

Cluster	Cottage	Flat	House	Townhouse	Small Holding
Other	Specify				
Approximate property size?					

Is your property fenced/Walled?

Yes	No
-----	----

Approximate Height

Electric Fencing?

Yes	No
-----	----

Is there a swimming pool?

Yes	No
-----	----

Is the pool fenced?

Yes	No
-----	----

Is the pool covered?

Yes	No
-----	----

Do you plan on moving or immigrating in the near future?

Yes	No
-----	----

If so where to?

Will your pets go with you?

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Are all members of the household in agreement with adopting a pet?

Yes	No
-----	----

WHERE DO YOU INTEND TO KEEP YOUR PET?

During the Day?

Inside	Outside
--------	---------

At Night?

Inside	Outside
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If outside what shelter is provided?

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What arrangements do you make for your pets while you are away?

Boarding Kennels	Friend/Relative	Domestic Worker	Neighbour
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Please specify?

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DO YOU HAVE ANY OTHER PETS?

Species		Age		Sex		Sterilized?	
Species		Age		Sex		Sterilized?	
Species		Age		Sex		Sterilized?	
Species		Age		Sex		Sterilized?	

Are all your pets vaccinations up to date? (If Yes please supply copies of vaccination cards)	Yes	No
Have you ever surrendered a pet?	Yes	No
If so why?		
Have you ever had a pet euthanized?	Yes	No
If so why?		
Have you ever lost a pet?	Yes	No
Explain		
How do you discipline your pets?		

VETERINARIAN'S DETAILS

Do you have a regular veterinarian?	Yes	No
Name of Clinic		
Address		
Contact Person		
Telephone		

OTHER

How did you hear about us?	

REFERENCES

Please provide two (2) or more personal references

Name	Telephone	Relationship
Address		
Name	Telephone	Relationship
Address		
Name	Telephone	Relationship
Address		

Are you willing to allow a representative do a home check?	Yes	No
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Please note that the Pit Bull you applied for after adoption is to be returned to Underdogs SA Rescue and Rehabilitation Centre should you decide not to keep him/her, or are unable to care for him/her for the rest of his/her natural life-span. Under no circumstances is the Pit Bull to be donated, sold, given away or surrendered to any other organization, as the Pit Bull remains the property of Underdogs SA Rescue and Rehabilitation Centre (refer to Adoption Contract).

**Banking Details: Underdogs SA Rehabilitation Centre, First National Bank, Kolonnade, Account# 62407434977
Reference: Dog's Name/Your Surname**

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Signature

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Date

FOR OFFICE USE

Home Check done?

Yes	No
-----	----

Home Check done by?

Date of Home check?

References done?

Yes	No
-----	----

Done By?

Application Approved?

Yes	No
-----	----

If not, specify?

Notes

Signature

Date

