



Adoption Application

About You and Your Family:

Name(s): _____

Street Address: _____

City, State, Zip: _____

Phone #'s: (H) _____ (Cell) _____

(Work) _____

Email Address(es): _____

Occupation(s): _____ Hours Worked Per Week: _____

List names and ages of all household members: _____

List any other pets you have (name, breed, age, spayed/neutered, length of time owned): _____

Do you or any members of your household have any allergies to animals: _____

A CDI volunteer will contact your veterinarian to verify spay/neuter, current vaccinations and monthly heartworm preventive for any dogs you currently own. Please alert your vet that a Veterinary Medical Records Release form will be sent to their office.

Veterinarian's Name: _____

Address: _____

Phone: _____ Email: _____

List types and approximate # of any livestock, horses or other farm animals: _____

What type of area do you live in?

Rural - approximate size of yard: _____

Suburban - approximate size of yard: _____

Urban - approximate size of yard: _____

Briefly describe your home (Square footage, 2 story, upstairs apartment etc...) _____

Please describe your fencing, including height, type, and portion of yard fenced: _____

If you rent, do you have written permission from your landlord to have a dog?

Yes_____ No_____ N/A_____

Landlord or Rental Management Company Name: _____

Address: _____

Phone: _____ Email: _____

Do you have any experience with the Border Collie breed? If yes, please describe: _____

About the dog you want to join your family:

Is there a particular dog in whom you are interested? If so, which one? _____

What traits are you looking for in a dog? _____

What do you consider undesirable traits in your dog? _____

Do you need your new dog to be good with children under 12 years old? If yes, what ages of children will your dog come in contact with on a regular basis? _____

What activity level do you desire in your new dog (active companion, performance dog, sporting dog, working dog, family pet, high-drive etc.)? _____

Planned activities, sports or work for your dog: _____

Do you anticipate using your dog to herd any type of livestock? _____

Please describe the dog's living quarters, where will they sleep, eat, spend time during the day and at night, left when no one is home, playtime, mental stimulation and exercise opportunities etc. and the general day to day routine for you and your dog. _____

What age dog do you prefer to adopt? (Check all that apply):

<6mos. 7 mos-2yrs 2-5yrs. >5yrs Senior

Do you have any preference of gender?

Female Male No Preference

Would you accept a Border Collie mix? Yes_____ No_____

Have you previously adopted companion animals from a shelter or rescue group? Yes_____ No_____

If yes, name of shelter or rescue group _____

Do you plan to attend obedience training with your new dog? Yes_____ No_____

Will you attend obedience training if there is a problem with your new dog? Yes_____ No_____

Have you ever relinquished a pet? If yes, please explain. _____

Under what circumstances would you feel it necessary to relinquish a dog? _____

General Dog Responsibility and Care

Who will bear the primary responsibility for feeding, exercising and training for the dog? _____

Where will the dog be kept during the day or when no one is at home? (check all that apply)

- Crate
- Inside house
- Porch
- Fenced Yard
- Kennel or Run
- Garage
- Tied Outside
- Free roaming in an unfenced area

Other _____

Where will the dog be kept at night? (check all that apply)

- Crate
- Inside house
- Porch
- Fenced Yard
- Kennel or Run
- Garage
- Tied Outside
- Free roaming in an unfenced area

Other _____

On average, how many hours a day will your dog spend alone? _____

What arrangements would be made for this dog during times of travel for vacation etc....? _____

If applicable, what brand of dog food do you currently feed your dog(s)? _____

What brand of heartworm preventive do you give your current dog(s)? _____

Heartworm disease is caused by a parasite transmitted to dogs by mosquitoes. It is rampant and can often be fatal. Treatment is both expensive (\$1000-\$2000) and tough on your dog's system. This disease, however, is easily prevented by annual heartworm tests and by administration of a monthly heartworm preventive.

Are you willing to commit to this level of care for the rest of your dog's life? Yes_____ No_____

Your dog will need annual or tri-annual vaccinations or titers for Rabies, Distemper, Leptospirosis and other vaccines as recommended by your vet. CDI requires adopters to provide annual veterinary check-ups.

Are you committed to this level of care for the rest of your dog's life? Yes_____ No_____

There are times when unexpected and often very expensive medical conditions may occur due to illness or injuries.

Are you committed to providing whatever medical care your veterinarian deems necessary for your dog? Yes_____ No_____

Dog/Applicant Compatibility

If you are interested in a specific dog, the foster can discuss with you the dog's personality, temperament and activity level to help determine if the particular dog is an appropriate fit for your home. **The board members of Clancy's Dream, Inc. retain the right to confirm, redirect, or deny any application for adoption.**

What will you do if the dog displays unwanted behavior such as barking, digging, chewing, etc? _____

What role do you hope this dog will play in your life? (please check all that apply)

- Companion for me
- Protector/Watchdog
- Companion for another dog
- Jogging Buddy
- Friend for Child

- Working Dog
- Sport Dog (agility etc...)
- Hunting Dog
- House Pet
- Gift
- Outside Dog
- Therapy Dog or service animal

Other _____

Do you have any questions or comments? _____

To Submit this application, you may do any of the following:

- a. Fill out the application online and when finished click the "Submit" button found at the top of the page.
- b. Print, scan and email the completed application to foster@clancysdream.org
- c. Complete and mail application to Clancy's Dream, 8092 Heather's Pass, Seymour, IN 47274

Clancy's Dream, Inc. is staffed entirely by unpaid volunteers. If a volunteer does not contact you within one week of submitting this application, please email our Application Coordinator at clancysdream@gmail.com