



Pet Adoption Application And Agreement

Team Triton Rescue

teamtriton.rescueadopt@gmailcom

Adopter Name: _____	Age of Applicant: _____
Mailing Address: _____	

_____ Postal Code: _____	
Phone: _____	Email: _____

Adopting a pet is a long term commitment. The information you provide will help to ensure the best match for your household. Thank you for answering the following questions to the best of your ability.

Name of Dog you wish to adopt:	Is everyone in the home in agreement to adopting a dog? Yes <input type="checkbox"/> No <input type="checkbox"/> Number of Adults in the household: _____
Number of Children in the home regularly?	Ages of children: _____
What is your family level of activity? Active <input type="checkbox"/> Moderate <input type="checkbox"/> Quiet <input type="checkbox"/>	Other pets in the home? Yes <input type="checkbox"/> No <input type="checkbox"/> Vacs. Up to date? Yes <input type="checkbox"/> No <input type="checkbox"/> If no explain why in description of pets Number of cats: _____ Spayed/neutered? Yes <input type="checkbox"/> No <input type="checkbox"/> Number of dogs: _____ Spayed/neutered? Yes <input type="checkbox"/> No <input type="checkbox"/> Describe any other pets (age/temperament/breed/etc)
What activity level do you want in a pet? Active <input type="checkbox"/> Moderate <input type="checkbox"/> Quiet <input type="checkbox"/> Describe Why This Activity Level Suits You:	If you have no other pets in the home do you agree to yearly vaccinations? Yes <input type="checkbox"/> No <input type="checkbox"/>
Who will be responsible for daily care of the pet?	If you live in a rental accommodation, do you have permission of the landlord/owner to have a pet? Yes <input type="checkbox"/> No <input type="checkbox"/> Landlord Contact Info: Not Applicable as you- Own your residency <input type="checkbox"/>
How often and how long daily will your pet be left alone? _____ Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Please explain above: _____ Where will the dog sleep at night? _____	Fenced in Yard/Run? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes type/ht of fence? _____ Urban/City Home? Yes <input type="checkbox"/> No <input type="checkbox"/> Apartment? Yes <input type="checkbox"/> If rural, how many acres? _____
Why are you interested in adopting a dog?	Do you agree to a representative of TT performing a home visit? Yes <input type="checkbox"/> No <input type="checkbox"/>
What are the occupations of the adults in the household? _____ _____ What plans do you have in place for the newly adopted pet who might require an adjustment period: _____ _____ _____	Veterinary Contact Information: _____ _____ Permission granted for Team Triton to Contact Above Mentioned Veterinarian? Yes <input type="checkbox"/> No <input type="checkbox"/> Initial: _____ Trainer/Boarding Facility Information: _____ _____ Plans for the Dog(s) if you take holidays: _____ _____



Pet Adoption Application And Agreement

Team Triton Rescue

teamtriton.rescueadopt@gmailcom

Have you owned dogs in the past? Yes <input type="checkbox"/> No <input type="checkbox"/> Please Describe: _____ _____	Have you ever surrendered a pet to a shelter? If yes please explain: _____ _____
Briefly describe your plans for exercise, training or enrichment for the dog you wish to adopt: Are there any behaviours you are unwilling to tolerate? What is your plan if you face unforeseen changes are unable to care for the dog you intend to adopt? Any other information about yourself that you would like to share?	

Adopter Acknowledgement/Agreement: Team Triton agrees to provide all veterinary records at the time of the adoption to become the property of the adopter. I agree to provide appropriate veterinary care as well as annual vaccinations. I agree that Team Triton may in its sole discretion and for any reason, approve or deny any application for adoption. Team Triton rescue will research all answers on your application and if any discrepancies are found the adoption will not proceed. Dogs adopted through the Team Triton must be returned to us if the adoption does not work out for ANY reason or be placed in a home approved by Team Triton. Adoption fees paid are non-refundable. If after 2 weeks from the date of adoption we do offer you a refund of your fee less \$200 if for some reason the adoption is not working out. I agree that I will not hold Team Triton Rescue responsible nor seek any compensation for damages, medical fees or other liabilities incurred by the dog I adopt.

Signature: _____ Team Triton Rep: _____ Date: _____

By signing you are in full agreement of the terms and conditions of the adoption process.

Adopted Pet Information (for office use only)

Name: _____ Age: _____ Tattoo/chip # _____ Rabies Tag# _____

Gender: Male Female Spayed/Neutered at time of adoption: Yes No

Breed/Description: _____ Health: _____

Other Characteristics: _____

Feeding at TT: _____

Office Use Only