

FCRSA RESCUE ADOPTION QUESTIONNAIRE

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Tel: _____ E-mail: _____

- Have you ever met or spent time with a Flat-Coated Retriever (FCR) Yes () No ()
If yes, have you ever owned a FCR before? Yes () No () If yes, where did you get the dog? _____

If No, why do you want a FCR now? _____

- Do you Rent () Own () Live with parents ()
If you rent, do you have the landlord's permission for a dog the size of a FCR? Yes () No ()
If yes, may we contact the landlord to verify? Yes () No ()
If yes, landlord's Name _____ Tel # _____
- Do you live in a City () Suburban Area () Rural Area ()
House () Apartment () Condominium () Mobile Home ()
- Is your yard fenced? Yes () No ()
If yes, what type of fence? _____ What height? _____
- Do you have the following for your adopted dog?
Crate/Dog cage () Kennel Run () Tie Out/Trolley System ()
- Do you work outside the home? Yes () No ()
If yes, what hours? _____
- Will someone be home during the day to care for and train this dog? Yes () No ()
- Do you want an Outside Dog () Inside Dog () Both ()?
Where will the dog be allowed? _____
- Who is the dog for? Self () Family ()
- Do you have any children: Yes () No () If so, what ages? _____
- Is there anyone in your family with known allergies? Yes () No ()
If yes, please explain _____
- Have you ever had any pets before? Yes () No ()
If yes, what kind and what happened to them? _____

- Do you have any other pets now? Yes () No () If yes, what kind? _____
- Will this dog be enrolled in an obedience class? Yes () No ()
- Will you take this dog for an annual veterinary examination and keep it on a proper vaccination and heartworm prevention schedule? Yes () No ()
- Are you willing and able to be financially responsible for this dog? Yes () No ()
- What will you do with this dog when you go on vacation? _____
- Do you agree to obey your City/State laws regarding dogs? Yes () No ()
- Do you agree to supervise this dog when loose and not allow it to roam free unattended?
Yes () No ()
- Do you agree to our phoning and/or visiting your adopted dog in your home in the future?
Yes () No ()
- Are you willing to travel, if so how far? _____
- How did you learn about FCRSA rescue? _____
- A donation of \$250 to \$300 is expected to help cover the expenses incurred by this dog as well as to help future dogs. Are you willing to make this donation? Yes () No ()

Please return this form to:

Jackie Capes PO BOX 156 Frankestown, NH. 03043

603-547-8607 Fax: 603-547-8654 maplemanse@aol.com Forms will be kept for 1 year. Please notify me if you obtain a dog. **Include your full name and state in all correspondence.**