

The Portuguese Water Dog Club of Canada / Rescue



Adoption Application Form

Please complete this application accurately so PWDCC Rescue can match you with a possible adoptee.

Name _____

Address _____

City _____

Province _____

Postal code _____

Tel/Home _____

Cell _____

Fax _____

email _____

Questions for you (circle to answer as required)

Have you every owned a PWD before : **Y N**

if not, why do you want a PWD and have you researched this breed? _____

If yes, do you still have the dog? _____

Male or Female _____ Spayed or Neutered **Y N** Age _____

Do you have any experience with large dogs? _____

Have you owned dogs before? **Y N** If so, what happened to them? _____

Do you have any other pets? **Y N** Describe _____

Do you live in a house or apartment? _____ Rent or Own _____

If you rent, does your rental agreement allow you to keep dogs? **Y N**

Do you have a yard? **Y N** Is it fenced? **Y N** If not, how do you plan to potty or exercise your PWD?

How many people in your household? _____

Do you have children? **Y N** If so, how many and what are the ages? _____

Is everyone in your household agreeable to adopting a rescued PWD? **Y N**

Does any member of your household have allergies? **Y N** Describe _____

Who will be the main caregiver? _____

Is someone home during the day? _____

Questions about the dog

Where will this PWD spend his or her time while you are gone? _____

Where will this PWD sleep? _____

Are you prepared to assume the financial responsibilities of caring for an animal, including inoculations, veterinarian care, good quality food, licensing, etc? **Y N**

Are you familiar with the animal control regulations in your area? **Y N**

The Portuguese Water Dog Club of Canada / Rescue

Adoption Application Form /page 2

Are you willing to allow a PWD Rescue representative member visit your home before or after adoption? (by appointment) **Y** **N**

Do you understand that this animal may not be housebroken and are you are willing to take the time to work with this PWD? **Y** **N**

What provisions will you make for this PWD when you go on vacation? _____

Do you have any preference regarding sex? **Y** **N** (If so specify) _____

Age preference? **Y** **N** Would you consider an older dog? **Y** **N** to what age? _____

A PWD mix? **Y** **N** Improper coat? **Y** **N** (may shed or be allergic to)

Are you willing to take A PWD with a medical condition? **Y** **N**

References:

May we check your references and verify the information you have provided? **Y** **N**

If yes, provide the following below.

Name and address of veterinarian you most often use: _____

Name, address, telephone of individuals who knows you and has known your other animals:

1/ _____

2/ _____

Conditions of Adoption:

The adopted dog is to be kept as an "indoor" companion animal and must never be permanently kenneled outdoors; it shall not be used for medical or other experimental studies. The adopted dog will be cared for humanely, including adequate food, shelter, water, preventative veterinary care, and will be licensed in accordance with the law in the jurisdiction in which he resides. The dog is to be exercised regularly in a safe manner.

The adopted dog may not be transferred to any other person for any reason, if the adopter is forced to relinquish custody of the dog at any time, said dog will be relinquished only to PWDCC Rescue. If the adopted dog is lost or stolen, the adopter will notify PWDCC Rescue immediately so we can use our resources to help locate the dog as soon as possible.

There will be no refund or reimbursement for any expenses incurred by the adopter for the adopted dog, even if it is returned to PWDCC Rescue. All records must be returned with the dog.

By signing below I am attesting that I have completed this application and the information in it is true and complete. I authorize investigation of all statements contained in this application. I understand that any mistatement, omission, falsification, or misrepresentation in this application may disqualify me from adopting a rescue PWD. I have read and understood the adoption application. If I am approved to adopt a PWDCC Rescue PWD, I agree to abide by all the terms and conditions contained in the agreement. I also understand that PWD Rescue reserves the right to refuse any application. I am 18 years of age or older. I have read and fully understand the above statements and conditions of adoption.

Signature

Date

Please mail application to:

PWDCC Rescue
c/o Jennifer Byers 2297 Hampton
Montreal PQ H4A2K5
jennifer@pwdcc.org
514-773-9376