



Adoption Form

Adoption Coordinator info@britishdalmatianwelfare.

The following questionnaire will ask certain personal questions that will help us identify and address the suitability between adopters and their dogs.

Please complete all appropriate sections as honestly as possible

Date of application

Name:

Address:

Post Code:

Phone:

Email:

Occupation:

Work location:

Working hours:

Name of other residents:

Occupations:

Work hours:

Name of other residents:

Occupations:

Work hours:

About your household members:

Adults in household over 18yrs:

Children in household including ages:

Any visiting children under 18 including ages:

Adults in household over 65 yrs

Any residents with frailty or mobility issues?

Any visitors with frailty or mobility issues?

Any residents or visitors with asthma or dog allergies?

Is there likely to be a planned change in your circumstances in the next 6 months eg new baby, job change, house move etc?

About your home

<input type="checkbox"/> Owner occupied	<input type="checkbox"/> Private rented	<input type="checkbox"/> Social Housing rented	
<input type="checkbox"/> Detached	<input type="checkbox"/> Semi detached	<input type="checkbox"/> Terraced	<input type="checkbox"/> Flat
<input type="checkbox"/> City	<input type="checkbox"/> Town	<input type="checkbox"/> Village	<input type="checkbox"/> Country

Is the garden fenced? Y N

Height of fencing

Dog exercising routine:

How often will you exercise your dog?

How long will you exercise your dog for?

How long will you need to leave your dog alone each day?

Where will the dog sleep at night?

Medical Care Provision

Have you considered any provision for medical care?

<input type="checkbox"/> Dog Insurance	<input type="checkbox"/> Vet Plan	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Cash payment
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Other animals

Do you have any other dogs at this address?

If so please advise on breed, sex, neutered and age.

Have you owned a Dalmatian before?

Do you have experience of medium or boisterous dogs?

Do you have any cats?

Do you have any other animals? If so please list:

Preferences

<input type="checkbox"/> Male	<input type="checkbox"/> Female	Reasons why? <input type="text"/>
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<input type="checkbox"/> Black spot	<input type="checkbox"/> Liver Spot
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<input type="checkbox"/> Have you experience of a deaf dog?	<input type="checkbox"/> Would you consider a deaf dog?
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Age range preferences

<input type="checkbox"/> 0-6months	<input type="checkbox"/> 6-12months	<input type="checkbox"/> 1-2yrs	<input type="checkbox"/> 2-5yrs	<input type="checkbox"/> 5-10yrs	<input type="checkbox"/> Over 10yrs
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Reason for age range?

<input type="checkbox"/> Prepared to travel to collect dog	<input type="checkbox"/> Prepared to travel half way to collect dog
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Prepared to offer a temporary foster home

How long are you prepared to wait?

Additional information

Please provide additional supporting information here:

PLEASE NOTE:

Completion of this form does not guarantee a dog being re-homed with you.

A home check with an unreserved recommendation is required.

Please complete this form and return to:

Sara Green, British Dalmatian Welfare Adoption Advisor

Postal

Mrs B Quigley, 3 Fairfax Close, Bolton Percy, YO23 7AY

Digital

Scan and email to: info@britishdalmatianwelfare.org

Any personal information provided by you will only be retained by BDW for the purpose for which you provided it. Such information will never be used for commercial purposes and may only be shared with any third party with your express permission. If you wish us to delete or amend any such information, please advise British Dalmatian Welfare in writing.



OFFICE USE ONLY

Date of receipt:

Application number