



Yoyo's Love of Rescue

DOG ADOPTION APPLICATION

Thank you for your interest in adopting! Please complete this form fully.

If Applicable:

Name of the dog you are interested in adopting: _____

Where did you find the posting of this dog: _____

Soonest date you can bring the dog home: _____

1. Applicant Information

Full Name:		Date:	
Street Address:		Apt/Suite:	
City, State, Zip:		Phone Number:	
Email Address:		Best Time to Call:	

2. Housing & Lifestyle

Residential Status: ☐ Own ☐ Rent ☐ Live with Parents

Home Type: ☐ House ☐ Apartment ☐ Condo ☐ Townhouse / Other

Do you have a yard? ☐ Yes ☐ No If yes, fence height / type: _____

If renting, do you have approval from your Landlord to have pets?: _____

Number of Adults in Home: _____ Number of Children: _____ Children Ages: _____

Is any member of the household allergic to dogs? ☐ Yes ☐ No

3. Current & Past Pets (Last 5 Years)

Pet Name & Breed	Age	Spayed/Neutered?	Current Status / Location	Up to date on vaccines?

Current/Previous Veterinarian Clinic Name: _____
Primary Phone Number: _____ **City / State:** _____

4. Dog Preferences & Care Routine

Desired Age Range: ☐ Puppy (<1 yr) ☐ Young (1-3 yrs) ☐ Adult (3-7 yrs) ☐ Senior (7+ yrs)
Desired Size: ☐ Small (<20 lbs) ☐ Medium (20-50 lbs) ☐ Large (50-80 lbs) ☐ XL (80+ lbs)
Where will the dog spend the day? _____
Where will the dog sleep at night? _____
How many hours per day will the dog be left alone? _____

5. Acknowledgement & Signature

By signing below, I certify that all information provided in this application is true, correct, and complete to the best of my knowledge. I understand that providing false details may result in the denial of this application or the revocation of any adoption agreement. I hereby authorize the rescue organization to contact my landlord, veterinarian, and personal references to verify the environment and care history.

Applicant Signature

Date

*** Please submit completed application to yoyosloveofrescue@gmail.com ****