

B.A.A.R.C. ADOPTION APPLICATION

Please PRINT and answer all questions

Thank you for your interest in adopting a dog rescued by B.A.A.R.C. Our primary goal is to match the animals with the living situation best suited for their long term care. Every family is different, and there are no right or wrong answers. This process will assist us in helping you find a pet well suited to your lifestyle.

Date of Application _____

What is the name of the dog you are interested in adopting? _____

Applicant's full name: _____

Current Address: where dog will reside: _____

City _____ State _____ Zip _____

Cell Phone: _____ Home # _____ Other # _____

Email address (required for pre-paid pet insurance) _____

Spouse/Partner Name _____ Phone# _____

Who is financially responsible for the adopted dog?

_____ Are you currently (check all that apply)

Employed Full-time? Employed Part-time? Unemployed?

Student (where)? _____ Retired? Other? (please explain) _____

If Employed Name of Employer _____ Work # _____

Job Title/line of work _____ How Long There? _____

Do you Own? Or Rent? your home. Type of dwelling House? Condo? Mobile? Apartment?

Do you have a completely fenced yard? Yes No

If Yes, describe type of fence and height?

How long at current address?

If less than 2 years what was your previous address?

If you rent/lease does your lease allow pets? Yes No How many pets? _____

Name and contact number of Landlord _____

Is there any Breed Specific restrictions/regulations where you live? Please explain _____

Do you have plans to move in the foreseeable future? Yes No If yes, where and why? _____

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What would you do if you moved to a place where dogs are not permitted? _____

How many adults live in your home other than yourself? Please list names and ages

How many children live in your home? Please list names and ages and if this will be their first dog

Does any member of the household have allergies or asthma? Yes No

Are ALL members of your household aware and in agreement and with this adoption? Yes No

Have you or any other person living at your residence been charged with crimes against animals or domestic violence? Yes No If yes explain details to interviewer

Please list all pets currently living in your household (exclude fish)

Name	Type	Male/Female?	Age	Spay/Neutered	Length Owned

Please tell us about this pet's weekly schedule as it relates to your schedule. How many consecutive hours per day will this dog be without human companionship?

SUN	MON	TUES	WED	THUR	FRI	SAT

How will you structure this pet's time when without human companionship?

Where will your pet be kept at night? _____

How will you exercise this pet? _____

What type of discipline/training will you use for this pet? _____

We recommend every dog receive training and socialization classes and in some cases require it. Will you consider attending training classes with this dog? Yes No

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The average pet has a life span of 12 to 15 years. Are you willing to make a commitment to this pet for the rest of its life? AND are you willing to provide the necessary love and attention as well as the necessary food, Vet care, etc. required to maintain a healthy happy pet? Yes No

Why do you feel a rescued dog is right for you/your family? _____

Are you using a veterinarian presently or have you used one in the last 12 months? If so please provide name, address and phone number _____

Please list three non-household personal references.

Name	Telephone	Relationship

The state of California requires that once you adopt a dog over the age of 4 months you have 30 days to get s/he licensed to you.

Bay Area Animal Rescue Crew saves animals from any shelter that needs our help as well as any person of the public that needs our help with an animal. The animals in our program receive worm treatments, vaccines and other medical care necessary. Most of these animals have unknown medical backgrounds and it is reasonable to expect some risk when taking a rescued animal home; therefore, the adopter assumes all responsibility for the animal's health, safety and behavior. There is no guarantee as to health, temperament breed or ultimate size of any animal. The adopter assumes the responsibility to take the animal to a veterinarian of their choice and continue regular checkups and vaccinations. BAY AREA ANIMAL RESCUE CREW, INC WILL NOT provide assistance with diagnosis, treatment, management or medical expenses once the animal is adopted.

I have read and completed all questions on the application truthfully and to the best of my knowledge and I am hereby giving my consent for Bay Area Animal Rescue Crew to verify any and all information contained herein. I understand that Bay Area Animal Rescue Crew, Inc. will rely on the answers I have provided on this application and during the interview. I understand that submitting this application for adoption does not guarantee approval. We reserve the right to refuse adoption to anyone. In the event false information is discovered, Bay Area Animal Rescue Crew reserves the right to reclaim possession of the animal.

Applicants Signature _____

Date _____

BAY AREA ANIMAL RESCUE CREW, INC. ADOPTION AGREEMENT

This is an agreement between the adopter _____ and Bay Area Animal Rescue Crew, Inc. (BAARC)

Animal Name/Rescue # _____

Gender Male Female Altered? Yes No

The following representations and conditions apply to your adoption of the aforementioned animal. Please read carefully as by signing this document you indicate you understand and agree to comply.

I am at least 18 years and as the lawful adopter of said animal I Agree:

- There is no guarantee of the breed, health or temperament of the animal I am adopting and I release BAARC from any and all claims of liability
- I agree to keep the animal in good health. I will provide routine health care including but not limited to vaccinations, internal and external parasite prevention, and general visits to a vet to ensure proper maintenance.
- If for whatever reason I cannot keep the animal, I agree to inform BAARC immediately, BAARC reserves the first right to reacquire the animal. I understand the Adoption Fee is non-refundable
- Animals will not be left unattended, tied, or chained up as a means of securing the animal. The animal will sleep indoors at night unless otherwise agreed upon.
- BAARC retains the right to repossess the animal at any time if there is any evidence of neglect or abuse, or if BAARC has good reason to believe that the home is not in the best interest of the animal or the owner.
- I give BAARC permission to call or visit my home at any reasonable time to assure that the animal is being properly treated and cared for.
- I understand that my animal has had its initial/all vaccinations. I agree that I am also responsible for any remaining vaccinations, including rabies if it has not gotten it yet. If the animal being adopted is under 6 months of age, I understand that more vaccinations may be required and I agree that I will provide these vaccinations at my own expense.
- I understand and agree that it is my responsibility to assume all risks of the animal's guardianship, including all costs incurred and risk of injury to myself and others after adoption. BAARC WILL NOT provide assistance with diagnosis, treatment, management or medical expenses of this animal once the animal is adopted.
- I agree that the animal is being adopted for myself and will not be sold, adopted, or given to another party
- I agree to keep BAARC informed of my current home address and phone number.

RELEASE: As the adopter of a Bay Area Animal Rescue Crew dog, on behalf of myself, my heirs, my personal representatives, and assigns, I hereby release, discharge, and indemnify BAARC, its directors, employees, representatives, committee members, fosters, volunteers, agents and all other similar persons associated with BAARC from any and all claims, demands, and liability, arising out of or in connection with the acceptance of said animal.

I have read, understand and agree with the provisions of this contract.

Applicants Signature

Date

Driver's License # and expiration date

Phone Number

Email Address REQUIRED for Insurance

Alternate Phone Number

