

# Heaven Sent Pit Bull Rescue

## Adoption Application

### Applicant Information

Name:

*Last*

*First*

*M.I.*

Address:

*Street Address*

*City*

*State*

*Zip*

Home Phone: (    )

Cell Phone: (    )

### Family/Household Information

Number of adults in household: \_\_\_\_\_

Number of children in household: \_\_\_\_\_

Ages of children: \_\_\_\_\_ Have the children been around dogs before?  Yes  No

Have all the adults in this household agreed to this adoption?  Yes  No If no, why not?

Have you owned dogs before?  Yes  No Any plans to move in the near future?  Yes  No

Is anyone in your household allergic to pets?  Yes  No ?

Why would you like to adopt a pit bull from us?

Companion for self

Gift

Companion for child

Watch Dog

Companion for other pet

Other: \_\_\_\_\_

Companion for another household member

**This information is requested to verify pet policies with your landlord.**

Do you live in:  Apartment  House  Townhouse  Other: \_\_\_\_\_

Do you:  Own  Rent  Rent to Own

Landlords Name: \_\_\_\_\_

Landlords Phone Nr: \_\_\_\_\_

## Adoption Information

How long have you been looking for a companion dog? \_\_\_\_\_

How much time are you prepared to allow your new pet to adjust to your home?

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How much do you expect to spend on medical care and maintenance on your dog in a year?

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Are you familiar with the cost of veterinary care?  Yes  No

Are you familiar annual vaccine requirements and heartworm/flea prevention?  Yes  No

Have you ever owned a Pit-Bull before?  Yes  No

Are you familiar with the breed?  Yes  No

Why do you want to adopt a Pit Bull?

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Where will your dog sleep?  Indoor  Outdoor  Garage

What are some of the behavioral issues you absolutely CANNOT tolerate?

Barking  Digging  Chewing  Aggression  Separation Anxiety  Other: \_\_\_\_\_

Any additional comments to let us know why you are qualified to adopt a Pit Bull?

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## Pet History

This information is requested to verify your current pets received the proper health care. Heaven Sent Pit Bull Rescue will call your Veterinarian to confirm.

Name of your Veterinary Clinic: \_\_\_\_\_

Tel: (       )                      Name of Veterinarian: \_\_\_\_\_

Breed	Age	Gender		Altered		Current Vaccines		Where do they live?
		Male	Female	YES	NO	YES	NO	

Have you ever given away or surrendered an animal to a shelter?  Yes  No

If yes, please state the circumstances: \_\_\_\_\_

\_\_\_\_\_

## Employment Information

This information is requested to verify that you can financially care for the dog you are applying for. Heaven Sent Pit Bull Rescue will call your place of employment for verification.

Employer 1: \_\_\_\_\_ Phone Nr: \_\_\_\_\_

Employer 2: \_\_\_\_\_ Phone Nr: \_\_\_\_\_

## References

This information is requested to confirm and verify that you are a responsible pet owner. Heaven Sent Pit Bull Rescue will call all your references listed to gain knowledge of your dedication and ability as a pet owner.

Name: \_\_\_\_\_ Phone Nr: \_\_\_\_\_ Years known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Nr: \_\_\_\_\_ Years known: \_\_\_\_\_

I, (print name) \_\_\_\_\_, certify that the above information is correct to the best of my knowledge. I have read the above information carefully and have filled out this application honestly. I understand that omission of information and/or failure to answer all questions and by not signing this application can result in this application being denied. If an omission or untruth is discovered after an adoption or re-homing takes place, I understand that Heaven Sent Pit Bull Rescue and their affiliates reserve the right to annul the adoption and reclaim the animal. I give Heaven Sent Pit Bull Rescue and their affiliate's permission to fully investigate the information provided as well as contact veterinarians and related officials.

**I understand that, by the State of Texas, I am required to comply with a background check to adopt a Pit Bull. I will supply the necessary information to Heaven Sent Pit Bull Rescue to comply with this requirement. All personal information shared with Heaven Sent Pit Bull Rescue will be kept completely confidential and will not be shared with any other organization, persons or businesses.**

I also understand that the \$50 adoption application fee is **non-refundable** and the application will not be processed until payment has been received. Please allow 2-3 weeks for processing.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Driver License Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Official Use ONLY**

Dog's Name: \_\_\_\_\_

\$50 Application Fee Paid on: \_\_\_\_\_

Background Check: \_\_\_\_\_

Interview: \_\_\_\_\_ 1<sup>st</sup> Home Visit: \_\_\_\_\_ 2<sup>nd</sup> Home Visit: \_\_\_\_\_

Adoption Fee: \$ \_\_\_\_\_ CHECK CASH Date Paid: \_\_\_\_\_

Training Follow Up: \_\_\_\_\_ Health Exam Follow Up: \_\_\_\_\_