

OLD DOMINION GREYHOUND ADOPTION

Gay Latimer, 636 Piney Point Rd., Virginia Beach, VA 23452

Phone (757) 486-7956

(For Adoption Center Use Only)

Name: _____

Address: _____

City, State: _____

Home Phone: _____

Cell Phone: _____

E-mail: _____

Emergency Name and Phone Number: _____

Adoption No: _____

Date: _____

L.E.: _____ R.E.: _____

Sex: M F

Color: _____ Age: _____

Name: _____

ADOPTION AGREEMENT

I herewith contribute the sum of **\$ 300.00** for the furtherance of good work as an adoption fee. I understand that this fee is not refundable, should I return said dog to Old Dominion Greyhound Adoption for any reason. I understand the questions on the application and authorize investigating of all statements contained in the said application. I acknowledge receiving from Old Dominion Greyhound Adoption custody of the above greyhound to which I solely promise:

- 1) I will provide humane care, no outdoor tie out, no garage housing, no releasing said dog in an unfenced area. I agree said dog is an indoor pet and cannot be kept in a dog house or left outside for an extended period of time. I will comply with laws and ordinances in force in my community.
- 2) I will report to Old Dominion Greyhound Adoption immediately if the Greyhound is lost, stolen or deceased.
- 3) I will allow no one to use said animal for any experimental purpose whatsoever.
- 4) I will return said Greyhound to Old Dominion Greyhound Adoption if at any time I desire to relinquish custody of it. I shall **NEVER** take said animal to an animal pound, shelter, or any other person or group without written permission from Old Dominion Greyhound Adoption.
- 5) I will return said animal to Old Dominion Greyhound Adoption if at any time I am requested to do so by Old Dominion Greyhound Adoption because of any violation of the terms of this agreement, making no charge for its upkeep or for any other reason.
- 6) I will not attempt to hold Old Dominion Greyhound Adoption or it's volunteers liable for any illness incurred in said dog or any damages and /or injury that said dog may do at any time in the future to any person and/or property, including but not limited to myself, my family, guests and invitees into my home and other third parties.
- 7) I will not use said animal for the purpose of hunting game animals or for racing.
- 8) I will give my dog heart worm prevention every month 12 month of the year and provide an annual visit to my vet for vaccines.
- 9) I will immediately obtain an identification tag for my greyhound showing my name, address and phone number in case my greyhound is lost.
- 10) I will accept all future liability with respect to said dog and I will indemnify and hold harmless The Old Dominion Greyhound Adoption .for any liability it may incur.
- 11) Any adopter violating this agreement shall be responsible for all cost incurred by Old Dominion Greyhound Adoption to recover the adopted greyhound, including and all legal expense.**

(Both parties) SIGNED: _____

DATE: _____

ADOPTER MUST PROVIDE PROPER ID: _____

DRIVERS LICENSE NO.: _____

ADOPTION CENTER REPRESENTATIVE: _____

****MILITARY OR SPOUSES OF MILITARY****

How long have you been stationed here? _____

How much longer will you live here? _____

Do you have a tour of duty over seas? _____

If so, do you know where you will be based? _____

Do you live in base housing? _____

Did you have animals at your last duty station? _____

Where are they now? _____

What will you do with your animal if you are transferred over seas? _____

How long will you be in the military? _____

Are you expecting a transfer? If so, do you know when and where you will transfer to? _____

What will happen to your greyhound if you have to move and they will not take your greyhound? _____

Military ID: _____

Duty Station: _____

Pay Grade: _____

OLD DOMINION GREYHOUND ADOPTION

Return to: Gay Latimer, 636 Piney Point Rd., Virginia Beach, VA 23452 Phone: 757-486-7956

ADOPTION APPLICATION (Adoption fee \$300.00-fee)

Pet ownership is a serious responsibility. It is the policy of Old Dominion Greyhound Adoption to assure that each person who adopts a Greyhound not only be aware of that responsibility, but that each person will be capable of and willing to accept responsibility **morally, physically, and financially**. It is quite true that not every person who desires to adopt a greyhound should have one. To assure fairness, we submit your application to a committee for approval. **We reserve the right to refuse any adoption application.**

The following questionnaire has been designed to aid both you and the Adoption Center in deciding if you and/or your family are indeed adequately prepared to assume the type of responsible ownership which we are endeavoring to assure for our adoptive Greyhounds. If there is not enough space to fully answer each question, attach an additional sheet for your responses. (Please print legibly)

Name: _____ Occupation: _____ Date: _____

Co-Applicant: _____ Occupation: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Work: (____) _____ Cell: (____) _____

E-mail Address: _____

How did you hear about us? _____

Have you attended one of our Meet & Greets or have you met Greyhounds in person before? **Y/N**

Have you contacted or filed an application with any other group? **Y/N** If you answered yes, please list the group(s) you have contacted: _____

Why do you want a Greyhound? _____

Desired Age? _____ Desired Sex? _____

Would you consider a Senior? **Y/N** Shy? **Y/N** Special Needs? **Y/N** Injured? **Y/N**

What type of personality/temperament do you think would fit with your family? _____

What pets do you currently have? Type _____ Weight _____ Sex _____

Spayed/Neutered? **Y/N** If not, why? _____

Where do they spend the day? _____ Night? _____

Did you ever take a pet to a Humane Society or Pound? **Y/N** If yes, please give the reason: _____

List adults in your household and ages: _____

List children and their ages: _____

Are your children good with animals? **Y/N Sometimes**

Do you have roommates? **Y/N** If yes, how many? _____

Are you a college student? **Y/N**

We do yard and home checks and will call to set up an appointment.

Do you have a fenced yard? **Y/N** What size yard? _____ Fence height: _____

Type of fence? **(We do not approve electric fences or invisible fences)** _____

Do you have a pool? **Y/N** Above ground? **Y/N** In- Ground? **Y/N**

What are your views on tying or chaining a dog outside? _____

Do you travel much? **Y/N** If so, who will take care of your Greyhound? _____

Approximately how many hours each day will your Greyhound be home alone? _____

Describe the area in which you live: _____

City: _____ Suburban: _____ Urban: _____

What do you reside in? House **Y/N** Mobile Home **Y/N** Condo **Y/N** Townhouse **Y/N**

How long have you lived at this address? _____

If you rent or lease, **provide written confirmation** from your landlord that you have permission to have a Greyhound.

Landlord's name: _____ Phone number: _____

Who will be responsible for the care and training of your new Greyhound? _____

If your Greyhound needs additional help in adjusting to home life, are you willing to seek help in working through the problem? **Y/N**

Would you be willing to learn how to provide behavior and obedience training for your new Greyhound? **Y/N**

Are you willing and able to let your Greyhound out for necessary functions at least 4 to 5 times a day? **Y/N**

Why is it important to keep your Greyhound on a leash? _____

Greyhounds MUST live inside your home. They cannot be kept in an outdoor kennel or dog house.

Do you agree to keep your new pet inside the home? **Y/N**

Is there a legal ordinance in your area pertaining to owning/housing an animal (i.e., leash laws, License, vaccinations)? **Y/N**

Are you willing to keep a collar and tag bearing your name, address and phone number on your Greyhound at all times? **Y/N**

If for any reason you are unable to keep your Greyhound, do you agree to return it to this adoption center? **Y/N**

Are you willing to accept immediate and full responsibility for the ownership of your Greyhound, including all health care costs and necessary burdens and responsibilities of owning a pet? **Y/N**

What is your estimate of the yearly expense of owning a Greyhound? _____

What does this figure include? _____

What reasons would you have to relinquish your Greyhound? (please check all that apply)

Barking	Whining	Crying	Chewing
Digging	Biting	Too Rough	Expense
Moving	Behavior	Housebreaking	Other

Have you previously had or adopted other pets? **Y/N** Please list the breed, name, years in your care, and reason you no longer have them: _____

If you have previously had other pets, were they spayed or neutered? **Y/N** If not, please explain: _____

Do you agree to give your dog Heartworm preventative? **Y/N** Have your dogs always been on Heartworm prevention? **Y/N**

Do you agree to maintain yearly visits to your vet? **Y/N**

Do you agree to follow your vet's recommendations on teeth cleaning? **Y/N**

Greyhounds live 12 to 15 years. Can you commit to caring for them for this period of time? **Y/N**

Have you ever been convicted of a felony? **Y/N** If yes, please explain: _____

Are you agreeable to a home visit prior to adoption and a later follow up visit? **Y/N**

You can get guarantees when you purchase a car or an appliance but none are available when you adopt an animal. Can we guarantee if the dog will bite or chew, have problems in housebreaking or love your children? Do you know anyone who is capable of guaranteeing anything in regard to animal behavior? Pets will make mistakes. After all, we all make mistakes so don't expect perfection. Give your greyhound a lot of love and patience and you will be greatly rewarded.

References

Veterinarian Reference (Please notify your vet that we will be calling)

List pet's name(s): 1) _____ 2) _____ 3) _____

Current or previous veterinarian's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Signing below authorizes your veterinarian to disclose your animal's records.

Personal References

Please list references that you have known for more than two years. At least one reference should be a neighbor. References can not be family members.

1. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: (Daytime) (____) _____ (Evening) (____) _____

2. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: (Daytime) (____) _____ (Evening) (____) _____

3. Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: (Daytime) (____) _____ (Evening) (____) _____

I/we certify that all the information on the Greyhound Adoption Application is true and correct.

Signature of both applicants: _____ Date: _____

_____ Date: _____