

FCRSA RESCUE ADOPTION QUESTIONNAIRE

Name: _____ Date: _____

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

Tel: _____ E-mail: _____

- Have you ever met or spent time with a Flat-Coated Retriever (FCR) Yes () No ()
If yes, have you ever owned a FCR before? Yes () No () If yes, where did you get the dog? _____

- If No, why do you want a FCR now? _____

- Do you Rent () Own () Live with parents ()
If you rent, do you have the landlord's permission for a dog the size of a FCR? Yes () No ()
If yes, may we contact the landlord to verify? Yes () No ()
If yes, landlord's Name _____ Tel # _____
- Do you live in a City () Suburban Area () Rural Area ()
House () Apartment () Condominium () Mobile Home ()
- Is your yard fenced? Yes () No ()
If yes, what type of fence? _____ What height? _____
- Do you have the following for your adopted dog?
Crate/Dog cage () Kennel Run () Tie Out/Trolley System ()
- Do you work outside the home? Yes () No ()
If yes, what hours? _____
- Will someone be home during the day to care for and train this dog? Yes () No ()
- Do you want an Outside Dog () Inside Dog () Both ()?
Where will the dog be allowed? _____
- Who is the dog for? Self () Family ()
- Do you have any children: Yes () No () If so, what ages? _____
- Is there anyone in your family with known allergies? Yes () No ()
If yes, please explain _____
- Have you ever had any pets before? Yes () No ()
If yes, what kind and what happened to them? _____

- Do you have any other pets now? Yes () No () If yes, what kind? _____
- Will this dog be enrolled in an obedience class? Yes () No ()
- Will you take this dog for an annual veterinary examination and keep it on a proper vaccination and heartworm prevention schedule? Yes () No ()
- Are you willing and able to be financially responsible for this dog? Yes () No ()
- What will you do with this dog when you go on vacation? _____
- Do you agree to obey your City/State laws regarding dogs? Yes () No ()
- Do you agree to supervise this dog when loose and not allow it to roam free unattended?
Yes () No ()
- Do you agree to our phoning and/or visiting your adopted dog in your home in the future?
Yes () No ()
- Are you willing to travel, if so how far? _____
- How did you learn about FCRSA rescue? _____
- A adoption fee of \$250 to \$300 is expected to help cover the expenses incurred by this dog as well as to help future dogs. Are you willing to pay this fee? Yes () No ()
- Your vet _____ Tel# _____ (for reference)

Please return this form to: Jackie Capes PO BOX 156 Francestown, NH. 03043

603-547-8607 Fax: 603-547-8654 or e-mail it maplemanse@aol.com **Forms will be kept for 1 year. Please notify me if you obtain a dog. Include your full name and state on all correspondence.**