

**ROCKET ANGEL ITALIAN GREYHOUND RESCUE  
ADOPTION APPLICATION**

Applicant Name: \_\_\_\_\_

Co-Applicant Name (Spouse/partner): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Spouse/Partner Occupation: \_\_\_\_\_

Spouse/Partner Employer: \_\_\_\_\_

Spouse/Partner Employer Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please list everyone residing in your home, their ages, and the hours they are at home, including yourself.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Hours at home: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Hours at home: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Hours at home: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Hours at home: \_\_\_\_\_

*Please list additional people on a separate sheet and attach if applicable.*

Why do you want to adopt an Italian Greyhound? \_\_\_\_\_

Have you ever heard of, or had, this breed before?  Yes  No

Where did you hear about the IG? \_\_\_\_\_

Is everyone in your family agreeable to having a dog?  Yes  No  Unsure

Who will be the primary caregiver? \_\_\_\_\_

Will anyone else help?  Yes  No  Unsure

Who? \_\_\_\_\_

Does anyone in the house have pet allergies?  Yes  No  Unsure

If yes, please explain: \_\_\_\_\_

Do you have any other pets?  Yes  No

If you answered yes, please list all other pets in the house by breed, type, and age:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are these pets up to date on vaccinations and health care?  Yes  No  N/A

Do you use heartworm prevention?  Yes  No  N/A

If yes, what kind? \_\_\_\_\_

Have you ever given a pet away/surrendered a pet to a shelter or rescue?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever applied to another rescue?  Yes  No  Unsure

If yes, which one? \_\_\_\_\_

Please provide rescue name/contact information if applicable: \_\_\_\_\_

\_\_\_\_\_

Was your application approved?  Yes  No  N/A

Did you have a good experience?  Yes  No  N/A

Please provide details. \_\_\_\_\_

\_\_\_\_\_

Which of the following describes your current living situation?

Own Home  Own Condo  Rent Home  Rent Apartment  Other

If applicable, what is the name of your landlord? \_\_\_\_\_

What is his/her phone number? \_\_\_\_\_

*(If you rent, your landlord must verify that you are allowed to have pets.)*

Do you have a private, fenced-in yard?  Yes  No How large? \_\_\_\_\_

Type/height of fence: \_\_\_\_\_

Can your gate(s) be opened from the outside?  Yes  No

If you answered yes, can you lock it or put a lock on it?  Yes  No  Unsure

*(We recommend it. Dog theft is, unfortunately, all too common. Dogs are used as bait and for laboratory experiments. Don't let yours be one of them! Children can open a gate, or forget to close it. These are sight hounds...they see it, they're gone!)*

If your yard is not fenced, would you be willing to fence it as part of the adoption agreement?  Yes  No  Unsure

If you do not/cannot have a fenced-in yard, what will you do to give your dog exercise and potty breaks? \_\_\_\_\_

\_\_\_\_\_

Do you have stairs, balconies, or decks?  Stairs  Balconies  Deck(s)  None

Do you have a pool?  Yes  No

If so, what will you do to safeguard the dog from falling in or drowning? \_\_\_\_\_

\_\_\_\_\_

Do you use chemicals on your lawn? (*Lawn chemicals be a hazard, cause death, an allergic reaction, or cancer after repeated exposure.*)  Yes  No  Unsure

Will you install a dog door?  Yes  No  Unsure

Where will the dog stay during the day, or while primary caregiver is at work? \_\_\_\_\_

\_\_\_\_\_

Where will your dog sleep at night? \_\_\_\_\_

\_\_\_\_\_

Are you familiar with crate training?  Yes  No

If you answered no, would you be willing to learn?  Yes  No  N/A

Are you familiar with clicker/operant training?  Yes  No

If not, may we recommend classes and tell you more about it?  Yes  No  N/A

How do you feel about pets on the furniture? \_\_\_\_\_

\_\_\_\_\_

If your dog misbehaves or has an accident, how will you correct it? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you travel frequently?  Yes  No

If so, what accommodations, if any, will you make for your dog? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do any friends/relatives/children/roommates have access to your home when you are not present?  Yes  No

How will you safeguard your pet from these people, who may not know how to care for your pet? \_\_\_\_\_

\_\_\_\_\_

Is there anyone in your home with special needs?  Yes  No

If so, please explain. \_\_\_\_\_

Have you ever considered pet insurance?  Yes  No  Unsure

We suggest VPI (*Veterinary Pet Insurance*), affordable and available online at [www.veterinarypetinsurance.com](http://www.veterinarypetinsurance.com).

What activities might you and your pet enjoy together? \_\_\_\_\_

Is there a dog park near you?  Yes  No  Unsure

What do you enjoy most about pet ownership? \_\_\_\_\_

What do you enjoy least? \_\_\_\_\_

Do you consider yourself to be...  A dog/pet owner  A dog/pet "parent"  Both

How would you describe your household activity level?  Very quiet  Easy going  
 Usually something going on  Lots of noise/activity  Entertain frequently

Are you expecting a child/planning for one in the future?  Yes  No  Unsure

Have you considered what the dog's role will be within the new family unit, and how a new child will affect your pet?  Yes  No  N/A

Will you be able to handle the added responsibility? (*We ask this for the dog's sake, as re-homing multiple times can be very upsetting to a dog.*)  Yes  No  N/A

Will you teach your children respect and tolerance?  Yes  No  N/A

Are you willing to take any of the following? (this will not affect your application):

Seniors  Special Needs  Needing medication  Physically handicapped

*Last, but not least, we'll need your references.*

Current veterinarian's name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work phone: \_\_\_\_\_

Email address: \_\_\_\_\_

*Two non-relatives for reference:*

Name of first reference: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of second reference: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Please carefully consider the financial costs and responsibilities of pet ownership, especially of the toy breeds like the IG that are fragile and sensitive.**

*IGs can live to be as old as 20 years old, and will need you even more as a loyal senior than they did as a younger dog. They need you to experience the journey with them, even when the going gets tough and it is hard for you to watch. You must not forsake them. They need you there at the end as well as the beginning.*

*IGs are house dogs. They enjoy a romp outside and sunning in the green grass, but they do not belong outside all day in the yard or a kennel. IGs need to be a part of the family, and will perish from exposure to heat or cold or just plain lack of love and attention. IGs need to be fed an exceptionally good diet. If you are not sure what that entails, please ask, and we will be glad to educate you. We are always available to answer questions or to steer you to someone who can.*

*IGs need to be fed once or twice daily, dependent upon age and needs. Free feeding is not suggested! We don't want a butterball! IGs also need to have their teeth brushed! This is not weird, it is routine, and will prevent dental/vet bills in the future. Poor oral hygiene can lead to other bodily diseases, as the infection spreads from the gums and into the bloodstream! Please inquire about our oral hygiene recommendations!*

*IGs need to be kept on a leash at all times outside of the house! Italian Greyhounds are 'sight hounds,' meaning if they see something, they run for it without thinking. Then, if they survive that, they may be too spooked to return. This breed was bred for the master's pleasure only, to be spoiled and loved, and to this day, IGs remain childlike in their thinking. This is another reason we suggest clicker training. Depending upon where you live, we may be able to guide you to a class nearby. Your dog's life may depend upon it. If nothing else, a clicker training class may help your dog become even more of a joy to live with! (Don't be fooled by obedience training, it is old fashioned, and not as dog-friendly.)*

Are you prepared to make a lifelong commitment to your dog?  Yes  No

Are you willing and able to accept full and immediate emotional responsibility for your new pet?  Yes  No

Do you realize that some rescued dogs need more love, attention, and patience due to prior abuse and neglect? *(Some may have accidents indoors for a few weeks even though they are "potty trained" due to stress.)*  Yes  No

If your new dog "acts out," are you willing to seek out why?  Yes  No

If, after you have had this dog for awhile, he or she suddenly acts up, won't eat, has potty accidents, or bites for no reason, will you consider that it may be for a reason unknown to you, perhaps they are sick or upset?  Yes  No

*I acknowledge that the information contained in this application is correct and up-to-date to the best of my knowledge, and I look forward to providing a rescue dog or other pet with the love, nurturing, and attention he or she so deserves.*

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you! We will be in touch with you soon.*