

AKITA RESCUE SOCIETY OF FLORIDA

PRE-ADOPTION APPLICATION

Date _____

Name _____

Address _____

Phone _____

Email _____

Which dog interests you? _____

Why? _____

Rate in order of importance: (1-4 with 1 as most important)

Age _____ Sex _____ Color _____ Personality _____

Where do you live? (ie. House, Apartment, Other) _____

If other please describe _____

Home details:

Fenced yard (Y/N) _____ Height of fence _____ Fence Type _____

Would Akita need to be leash walked or could he/she exercise freely in your yard? _____

Describe if necessary _____

Number of adults _____ Children _____ Ages of children _____

Other current pets _____ Sex of pets _____

Past pets _____

Number of hours pet will be alone daily _____

Veterinarian _____ Phone _____

Additional reference (not related to you) _____

Landlord if renting _____ Phone _____

House checks are required. Purchase of a 48" crate is required. Chaining dog is not allowed. Indoor homes are required.

Additional information you would like us to know. _____
