**ECGRC Rescue - Adoption Application Form**

In order to help match the right dog to your situation, could you please complete the form below as accurately as possible, and return to the Rescue and Re Homing Officer.

**PERSONAL DETAILS**

**Name:**

**Address:**

**Telephone Number:**

**Email:**

**Number of adults in household:**

**Age of the primary carer for the dog**

(*required to help ensure the right dog is matched into the household*):

**Details of any medical/ mobility considerations of the primary carer for the dog that need to be taken into account**

*(required to help with the matching of suitable dogs into the household)*

**Number and age of any children in the household, or regular visiting children such as grandchildren** (*required to help with the matching process as not all rescue dogs can cope with children*):

**LIFESTYLE**

**Household Work Pattern** *(full time/ part time/ home based/ retired etc):*

**How many hours do you work away from home, and what arrangements are in place whilst you are at work:**

**Details of any imminent planned vacations or hospital admissions:**

**Details of any other dogs in the household** *(incl. their breed, age, sex, are they neutered, what are they like with other dogs etc):*

**Details of any other pets in the household** (*please provide details)***:**

**Type of property/ accommodation** *(i.e. house/ groundfloor flat, rented/ owned etc):*

**If rented, do you have permission from the landlord to keep a dog:** YES/NO

**Approximate size of garden:**

**Is the garden secure** (*please provide details including height and condition of any fencing etc):*

**Are you prepared for ECGRC to conduct a pre placement home visit.** YES/NO

**EXPERIENCE**

*Is this your first dog: YES/NO*

*Have you previously owned a Golden Retriever: YES/NO*

*Have you previously owned other dogs (if so what breeds):*

**PREFERENCE**

*Do you prefer:* MALE/ FEMALE/ NO PREFERENCE

*If required, are you prepared to take a dog to training classes:* YES/NO

*Would you consider a dog with behavioural or health issues:* YES/NO

*Would you consider adopting 2 dogs from the same family which may need to stay together:* YES/NO

*Are you prepared to offer an older dog (aged 8 or above) a home:* YES/NO

**OTHER**

*Please use this space for anything else that you feel may be relevant to your application:*

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Notes:***

1. ***By returning this form you agree to the ‘ECGRC Rescue and Rehoming Officer’ storing your personal data soley for the purposes of matching suitable dogs to your particular circumstances.***
2. ***If successful in your application, ECGRC will require you to enter into an adoption agreement and will request a discretionary donation which will be used to fund future Rescue and Rehoming activities.***