

***Please type or print application.*** Date**: \_\_\_\_\_\_\_\_\_\_\_\_**

**NATIONAL IRISH WOLFHOUND ASSOCIATION**

**Application for Adoption**

**Section 1 – About You**

Applicant Name: Co-Applicant Name:

Address: City: State: Zip:

Home Phone: ( ) Work Phone: ( ) Cell Phone: ( )

E-mail Address: Alternate E-mail Address:

Are you □ married or □ single? Does everyone in your household approve of the adoption? □ yes □ no

Do you □ own or □ rent? How long have you lived there?

If you do NOT own your home, please include a copy of your rental/lease agreement with landlord name and telephone number with the application. We will contact all landlords to verify pet policies.

Employer Name:

Employer Address: City: State: Zip:

Telephone Number: ( ) Number of Years with Employer?

Others living with you, or those who are frequent visitors to your home (defined as 1 or more visits per week).

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| **Name** | **Relationship** | **Age** | **Living with you or Visitor?** |
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### Section 2 – About Your Ideal Irish Wolfhound

How did you hear about NIWA Rescue?

Have you applied for a dog with another Rescue Group? □ yes □ no

If yes, which one(s)?

Do you have prior experience owning and/or handling Irish Wolfhounds? (explain)

Why are you interested in Irish Wolfhounds as a breed?

What other breeds are you considering and why?

Are you interested in an IW mixed breed/dog we may have available? □ yes □ no

Are you willing to wait if a dog is not immediately available? □ yes □ no

Would you consider a special needs dog, such as one who requires medication for a permanent but controlled condition (for example: allergies)? □ yes □ no

Preferences – Please mark all that apply. Sex: □ Male □ Female □ No Preference

Color: □ grey □ wheaten  black  brindle  red  white □ No Preference

Age: □ Under 6 months □ 6-12 months □ 1-2 years □ 2-4 years □ 4-6 years

□ 7+years (ask about our Seniors-For-Life program) □ No Preference

**Why are you adopting a pet?** □ For me/my family □ As a gift □ For protection □ As a companion for another animal □ Friend/family have/had one □ For breeding

□ Other:

Please list the top THREE characteristics (in order of importance) you are looking for in your new companion (i.e.: protective, active/playful, aggressive, friendly, good with kids, calm etc…)

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# Section 3 – About Your Household

Are there any circumstances (health, family, professional, financial) or planned circumstances (new baby, plans to move houses etc.) that could result in your being unable to take care of this dog?

□ yes □ no If yes, what are they?

### If there are children in or visiting your home, how will you educate and train the children in appropriate ways to treat and interact with a dog?

Do you have a formal provision for the dog in the event you are no longer able to care for him/her?

□ yes □ no If not, will you agree to make such provision immediately after adoption? □ yes □ no

Do you (or anyone else in the household) have asthma or allergies to animals? □ yes □ no

Have you ever sold, surrendered, or given away a pet? □ yes □ no If yes, please provide details. Answering yes, will not preclude you from obtaining a wolfhound.

What circumstances, in your mind, justify giving away or surrendering a pet?

What will you do with the animal if you move, marry, have a baby, or make other significant changes in your life circumstances?

Are you willing to provide pet care for the next 10 years (or more) including vet checks, vaccinations, boarding, medical care (including monthly heartworm preventative), indoor housing, etc? □ yes □ no

What do you expect to pay for annual pet care?

Will you groom the dog yourself? □ yes □ no Use a groomer? □ yes □ no

Are you familiar with the animal control regulations in your area? □ yes □ no

Do you agree to abide by these regulations? □ yes □ no Briefly, what are these regulations?

Have you ever lost a pet, had one disappear, or die at an early age (dogs dying before age 8)?

□ yes □ no If yes, please provide details.

Please list all current pets and those you have owned over the last 10 years. If none, list pets owned in childhood. List ALL animals currently living with you, even if you do not own them. If deceased, when did the pet die, how old was the pet when it died, please explain cause of death.

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| **Name** | **Breed** | **Gender** | **Age** | **Spayed / Neutered** | **How long owned?** | **What happened to the pet?** |
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Are your dogs (past and present) on heartworm preventative? □ yes □ no

Have you ever had a dog diagnosed as having heartworm? □ yes □ no

**Section 4 – About Your Daily Routine**

**Please be very specific and detailed regarding the following information.**

Please tell us about yourself and your family, including any special activities your dog would be included:

Who will be the primary caregiver?

Where will the pet be kept during the day? At night?

Is anyone home during the day? □ yes □ no If yes, who?

How many hours will the dog be without humans during any time period?

Where will the pet be kept during routine absences (trips to the grocery store, movies, etc.)?

Do you have a kennel run? □ yes □ no Doghouse? □ yes □ no Tie-out stake? □ yes □ no

If yes to any of the above, how often is it used and under what circumstances?

How do you plan to exercise your pet? (provide details)

Is your yard fenced? □ yes □ no How high is the fence and what type is it?

Have you ever trained a dog? □ yes □ no Explain briefly:

Are you willing to enroll in obedience classes? □ yes □ no

Are you willing to take the time to work with a dog that is not housebroken? □ yes □ no

How much time are you willing to give the dog to adjust to its new environment and family members?

If the dog didn’t adjust in that timeframe what would you do?

If you adopted a dog that chews, digs, or has other bad habits, what would you do?

If your adopted dog developed a serious health problem, what do you think your limitations would be?

May a representative of NIWA Rescue visit your home prior to an adoption? □ yes □ no

Are you willing to travel to pick up your adopted dog?

# Section 5 – References

May we contact your veterinarian? □ yes □ no *Please notify your veterinarian that we will be contacting them and give the office permission to release your records to us.*

Name & Address of past/current vet(s):

Phone Number: ( )

Name of pets treated:

Please provide three additional references (not related to you):

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| Name | Evening Telephone  | Relationship | How long known |
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*I have read the National Irish Wolfhound Rescue Adoption Guidelines and certify the information provided in this application is accurate to the best of my knowledge and that I am over 21 years of age.*

Applicant Signature (Date) Co-Applicant Signature (Date)

Thank you for taking the time to complete this detailed application. A representative will contact you as soon as possible to notify you that your application has been received and go over the application process with you. Applications will be reviewed in the order they are received, however we reserve the right to adopt each dog to the family situation we deem to be the best match for the dog’s personality and needs. We also reserve the right to refuse any application at our sole discretion. We require a **home visit and reference check** as part of our application process and therefore adoptions can take several weeks to complete. Applicants must be 21 years of age.

NIWA/ Vicki Nichols OR:

400 Susan Road text: 636-667-9559

St. Louis MO 63129 E-mail: NIWAinc@Outlook.com or vickienichols821@gmail.com

Please send your completed application to:

*(Please allow additional time if you*

*mail your application.)*

***Thank you for opening your heart and home to an Irish Wolfhound***