

Applicant Information

Date: * _____

Applicant's Name: * _____

Co-Applicant's Name: _____

Street Address: * _____

City: * _____

State: * _____

Zip Code: * _____

Please state the area of Houston you live in (i.e. NW, SE, Galleria, etc.): _____

Email Address: * _____

Daytime Phone Number: * _____

Evening Phone Number: * _____

Occupation of Applicant: * _____

Occupation of Co-Applicant: _____

Driver's License #: _____

Your Family and Pets

How many adults are currently living in your home? * _____

How many children are currently living in your home? * _____

Ages Of Children: _____

Do you have any pets at this time? Yes _____ No _____ What kind? _____

Do you live in a: * House _____ Town Home or Condo _____ Duplex _____

Trailer or Mobile Home _____ Apartment _____ Other _____

If Other, explain: _____

Do you Rent or Own your home? * Rent_ _____ Own _____

If renting, please provide Landlords or Managers name and phone number. _____

Do you have a secure fence attached to your house, which encloses your yard? * Yes _____ No _____

Type and Height of fence? _____

Note: Please list material (wood, vinyl, chain link, etc.) The fence needs to be a minimum of 5' high (6' is preferred), and be in good shape so that dog cannot find a way to escape. If you do not know the exact height, please enter an estimate and note that it is an estimate. An Invisible Fence cannot be used, as most dogs will run through the boundary.

Please describe any unique features in your yard: _____

Has anyone in your household ever been accused or convicted of animal neglect or abuse? * _____

Do you have any other pets (dog, cat, rodent, bird, snake, ferret, horse, farm animals, etc.)? * _____

Please list ALL current pets – Type/ Name/ Age/ and whether or not they're spayed/neutered: _____

Are your current pets all up to date on vaccinations and preventatives? _____

List former pets (type: cat/dog/etc.) that have shared your life over the past five years, detailing what happened to them
(1) natural death due to age (2) illness (3) euthanasia (4) accident (5) given away/reason(s): _____

References

Veterinarian's Name (Clinic Name and Doctor Name) * _____

Veterinarian's Phone Number * _____

Date of last visit: _____

Note: Please call your Vet and let them know that Twyla's Friends will be calling for reference, and give them permission to release information to us.

Please list two personal references. At least one of them must NOT be a family member.

Reference #1 Name: * _____

Reference #1 Phone Number: * _____

Reference #2 Name: * _____

Reference #2 Phone Number: * _____

Note: Please call your References and let them know Twyla's Friends will be calling.

Your Interest in a Dog

Why do you want a dog? (check all that apply) *

Companion _____ Child's Companion _____ Guard Dog _____ Performance Sport _____

Gift _____ Service Dog Training _____ Personal Protection _____ Other _____

List any step-children, grandchildren and other children, including their ages, who visit on a regular basis (week-ends, vacations, etc.): _____

Is there anyone at home who might be adversely affected by a dog (i.e. allergies)?* Yes _____ No _____

Care and Training

Who will be responsible for the care of the dog?* _____

Where will the dog be kept during the day?* _____

Where will the dog be kept at night?* _____

How many hours a day will the dog be alone?* _____

Are you familiar with the use of a crate to train and/or confine the dog in your absence or when you are not able to adequately supervise a puppy to keep him/her out of trouble?* Yes _____ No _____

Will your dog have the run of the house?* Yes _____ No _____

Will the dog be tied outside or live in the yard?* Yes _____ No _____

Describe your dog training experience: * _____

How will you discipline your dog? _____

What will you do with your dog when you go on vacation? _____

How will you exercise your dog? _____

If you move, what will you do with your dog? _____

Are you willing to take responsibility for this dog for 10 years or more? Yes _____ No _____

Are you aware that the costs involved in taking care of a large dog each year (vet care, licensing, food, toys, treats, obedience training, etc.) will likely exceed \$1,200? Yes _____ No _____

What heartworm preventative will you use? _____

What steps will you take to control fleas? _____

We require that all dogs be spayed/neutered prior to adoption, do you have any questions about this policy? _____

If you are unable to care for your dog in the future, who will accept responsibility for its care? _____

We try to follow up on the welfare of our adopted dogs - would you mind a visit or a call? Yes _____ No _____

Gender Preferred? Male _____ Female _____

Note: All dogs are spayed/neutered prior to adoption.

Dogs listed on our site in which you are interested: _____

Please add any other information that you think might be helpful to us in evaluating your application: _____

How did you hear about us? _____

Terms and Conditions

Please know that this application will not be processed unless you have checked both boxes below AND signed the application. By checking the boxes you will be agreeing to the following terms and conditions:

- That you have carefully reviewed the adoption application and have answered each question truthfully and completely to the best of your knowledge.
- That failure to complete this form in its entirety and/or knowingly omitting pertinent information may cause your application to be declined.
- That you understand this application is required in order to adopt a dog from Twyla's Friends, but that submitting the completed application is not a guarantee that your adoption application will be approved; it is merely the first step in the adoption process.
- That you understand Twyla's Friends is a group run exclusively by volunteers who donate their spare time, and, as such, the adoption process may take more than a week to complete.
- That once personal and veterinary references are approved, a home visit with a Twyla's Friends volunteer is mandatory in order for you to be approved to adopt a dog from Twyla's Friends.
- Lastly, you acknowledge that it is our policy that all family members must be present during the home visit.

Therefore, I hereby:

_____ Confirm that I have read, understand, and agree to all terms and conditions stated in the Adoption Policy and Application.

_____ Confirm that all of the information I have provided on this application is true and accurate to the best of my knowledge.

Applicant Signature: _____ Date: _____

CO-Applicant Signature: _____ Date: _____