

# Application to Adopt or Foster from World Animal Guardians

All information you provide is strictly confidential and is **only** used for screening your adoption application.  
We respect your privacy!

## APPLICATION TO ADOPT or FOSTER (circle one)

\_\_\_\_\_ (NAME OF PET)

### Contact Information

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

City \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_

Business: ( ) \_\_\_\_\_

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

Best time to contact you (check all that apply): Morning \_\_\_ Evening \_\_\_ Anytime \_\_\_

Have you adopted or fostered a dog from the WAG previously? Yes \_\_\_ No \_\_\_

Have you adopted or fostered for another rescue organization?

If yes, please specify: \_\_\_\_\_

### Household Information – Section I

*Animals are all unique. Household information allows us to match them with your physical environment as well as with the characteristics of your family. We will not knowingly place a pet that is uneasy around children in a home with children!*

1. Describe Household Members (include ages & occupation (if applicable) of all persons in residence):

\_\_\_\_\_

2. Do any members of the household have allergies, if Yes please explain:

\_\_\_\_\_

3. Is your home: Rented \_\_\_ Owned \_\_\_\_\_

- a) If rented, does your landlord permit dogs/large dogs? Yes \_\_\_ No \_\_\_
- b) How long have you lived at your current address? \_\_\_\_\_
- c) Select your neighborhood area: Rural \_\_\_ Suburban \_\_\_ Urban \_\_\_
- d) Home Setting: House \_\_\_ Apt/Condo \_\_\_ Townhouse \_\_\_ Duplex \_\_\_  
 Mobile home park \_\_\_  
 Other: \_\_\_\_\_
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4. Describe inside your home and also your yard or outdoor space for your pet. If fenced yard, please describe type, height, and size of fenced yard. If patio space, please describe.

- a) Dogs: If your yard is not fenced, describe the measures you will take to keep a dog secure while they are outdoors:
- b) Cats: Describe how you will keep your indoor cats enriched and happy:
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## Household Pets – Section II

*Knowing about your current and past household pets and experiences allows us to better match a pet with the right personality and temperament to your home. We want to ensure that a new pet is not stressful to your family, to other pets in your home, or to the pet you would like to adopt.*

1. Describe your current pets: Name(s), species, breed(s), size(s), age(s), gender(s), pack hierarchy:

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2. Are all of your pets spayed/neutered? Yes \_\_\_ No \_\_\_
- a) On heartworm preventative each year: Yes \_\_\_ No \_\_\_
- b) Do your pets have: All vaccines yearly \_\_\_ Limited vaccines \_\_\_ Titters only \_\_\_
- c) Does your community have bylaws regarding vaccines or number of pets allowed in homes? Yes \_\_\_ No \_\_\_ I don't know \_\_\_
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3. Where, what & how are your pets fed?

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4. Describe monthly & annual health care for your current pets:

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5. Do you have exotics, small animals or livestock? Please Describe:

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6. Describe dogs you've had in the past -- Name, breed, size, age, sex, pack position, how long did you have them? What happened to them?

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7. How will you introduce a pet into your home?

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### Information – Section III

*This section allows us to understand and respect your preferences from the onset. Please take the time to think about your likes and dislikes, lifestyle, free time and your experience.*

1. Please select the kind of pet you would prefer to adopt:

Male  Female  Either sex   
 Senior  Adult  Teenager  Less than 2 yrs of age   
 Dog with a medical condition/on medication  Dog recovering from surgery   
 Healthy dogs  Any of the above

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2. Characteristics you would prefer in a pet (check all that apply):

Housebroken  Good with children under 5  Good with school-age children   
 Good with teenagers  Good with seniors and/or disabled adults in the home   
 Gets along with: Cats  Small dogs  Large dogs   
 Other: (specify) \_\_\_\_\_

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3. Do you have experience, special training, or skills to deal with the following type of dogs (check all that apply)?

Dogs needing quarantine \_\_\_ Dogs with allergies \_\_\_ Feeding special diets \_\_\_ Dogs that are: Shy/submissive \_\_\_ Fearful \_\_\_ Dominant/pushy \_\_\_

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4. Living in your home:

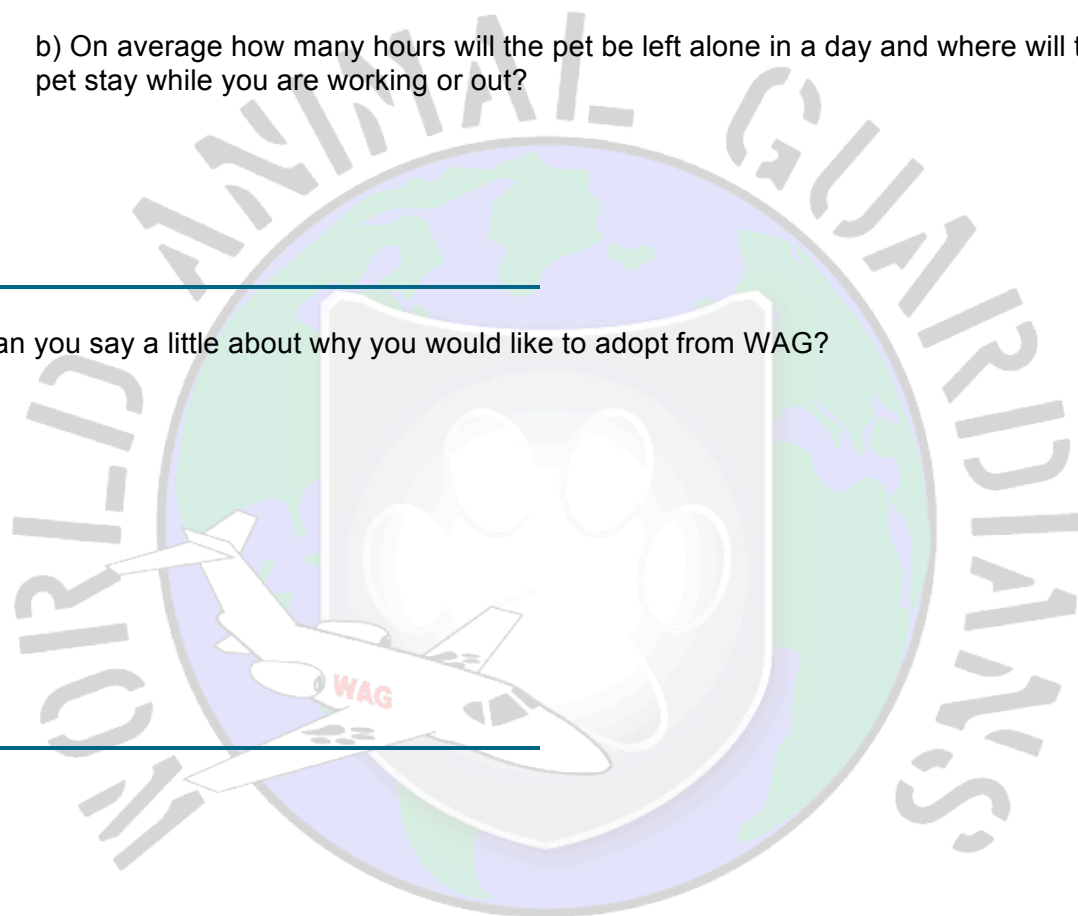
a) Where will the pet sleep?

b) On average how many hours will the pet be left alone in a day and where will the pet stay while you are working or out?

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6. Can you say a little about why you would like to adopt from WAG?

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## References

Vet Clinic Name: \_\_\_\_\_ Phone Number: (    ) \_\_\_\_\_

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

Personal: \_\_\_\_\_ Phone Number: (    ) \_\_\_\_\_

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

Personal: \_\_\_\_\_ Phone Number: (    ) \_\_\_\_\_

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

I UNDERSTAND THAT MY REFERENCES WILL BE CHECKED AND THAT AN ADOPTION COORDINATOR WILL VISIT MY HOME.

I UNDERSTAND THAT THIS FORM IS FOR THE SOLE PURPOSE OF APPLYING TO FOSTER OR ADOPT A PET FROM WAG. I UNDERSTAND THAT SUBMISSION OF THIS COMPLETED FORM IS NOT A GUARANTEE THAT I WILL BECOME AN APPROVED FOSTER OR ADOPTER FOR WAG. IF MY REGISTRATION IS APPROVED, I WILL BE REQUIRED TO SIGN AN ADOPTION AGREEMENT OR FOSTER AGREEMENT, HAVE A HOME VISIT, AND SUBMIT ADDITIONAL REFERENCES IF NEEDED.

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

WAG Representative: \_\_\_\_\_

Print and complete this form and send as an e-mail attachment to:

**worldanimalguardians@gmail.com**

*THANK YOU FOR OPENING YOUR HEART AND HOME TO A RESCUE!*