FaerieLand Rescue



PO Box 213, Anoka, MN 55303 612-414-4073 phone 866-314-2402 fax faerielandrescue@gmail.com www.faerielandrescue.org

Application for adoption

The answers that you give on this questionnaire will help to determine the best possible match between you and a rescue dog/puppy and help me to understand your lifestyle, experience and commitment to adopt a Welsh Corgi (Pembroke or Cardigan) or German Shepherd Dog. Filling out this questionnaire, does not guarantee you will be able to adopt a dog from FaerieLand German Shepherd & Welsh Corgi Rescue, Inc.

Name:
Address:
City/State/Zip Code:
Phone-Day:
Phone-Evening:
Email:
Number of People in your home Number of Children in your home Age(s) of Children living in your home
What is your age Your spouses' age
Do you Rent Own Condo House Apartment
How long have you lived there
Have you ever owned a Welsh Corgi Pembroke or Cardigan
What attracted you to a Welsh Corgi
Have you ever owned a German Shepherd
What attracted you to a German Shepherd
List your experience here
What is your primary reason for wanting a Welsh Corgi or German Shepherd
If you previously had a dog what happened to the dog
Do you still have the dog
What Animals do you currently own - list type, ages and sex
Is your yard fenced Height of fence
If no fence - do you plan on fencing
If the yard is partially fenced, only 3 sides, this does not constitute a fenced yard.

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Do you have a kennel run Size	
If no fence or kennel run who will be responsible for exercising and toilet duties of this dog	
Which sex do you prefer and why	
What color preference	
Do you have a preference: Purebred or Mix Male or Female	
You and your spouse occupations	
What is the family's work schedule	
How many hours gone each day	
Will someone come home to let the dog out during the day	
Where will the /dog be kept during the day when family members are at work	
Where will the dog spend the night	
When the family travels where will the dog be	
What arrangement if puppy does not house break real fast	
Will you crate train the dog	
Who will be the primary care giver of this dog	
Is there anyone in your family allergic to dog or dog hair and whom	
Will there be regular veterinary care for this dog	
Do you agree to obey all dog laws for your state county and city	
Do you agree to contact FaerieLand Rescue if you can no longer keep this puppy/dog	
What would you do if there was a divorce	
What would happen if you lose your job	
Do you have plans to add any children to your present family	
Are you planning on moving	
Would you be willing for me or my representative to visit your home	

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Name address and phone number of veterinarian
Please contact your vet and give permission to him or her for me to make a reference:
Name of Vet, address and phone number:
,
2 personal References / Name address and phone:
If renting a statement from your landlord is required stating pets are allowed or the association's written
policy that the German Shepherd/Welsh Corgi is an acceptable breed allowed in their buildings:
Name of landlord/signature:
Address of Landlord:
Phone number landlord:
How were you referred to FaerieLand Rescue
Do you agree that the statements in this questionnaire are true and complete
Please sign (digitally is acceptable)
Date:

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