

HAPPY TAILS DACHSHUND RESCUE



Consultation Form

If you were referred by a rescue member, please enter members name:					
Please list your contact information:					
Name:	E-ma	il:			
Address:	City:_	State:	Zip:		
Home Phone:	Work	Phone:			
Cell Phone:	Best 1	Best Time to call:			
Our Mission: Happy Tails Dachshund F volunteers who love the Dachshu abuse, or abandonment and to ad Please note: Adopting an animal is a	ind dog breed. Our mi lopt them into as many	ssion is to save as loving, forever hom	many Doxies from euthanasia, es as possible.		
successful adoption! This information for you & your family.					
The average age of a rescue is betwee adoption. Dachshunds frequently slightly longer. Dachshunds will m	live 16 - 18 years. If y	ou prefer a younger	r Dachshund, your wait may be		
Your Home					
Number in household? Childre	en?If Yes,	what age?			
Do you own or rent?	If you	rent, does your land	llord allow animals?		
If you rent, are there any breed restriction	ns?If so, v	hat are they?			
Is your yard, or a portion of your yard sec	curely fenced?	Does your home	e have a dog door?		
If you have a pool, is it fenced?	lf you l	nave a dog run, is it	secure?		
If you do not own your home, have a fenallow it to relieve itself:			plan to exercise your dog and		
Are you familiar with crate training?	Are you	amiliar with obedier	nce training?		
Does anyone in the household have any	known allergies to ani	mals?			
Why A Dachshund?					
Have you previously owned a Dachshun	d?What did	you like about the b	oreed?		

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History of Pet Ownership

What animals currently live in the household? (Please list type of animal, name, sex, age and how long you have owned them, and are they inside or outside animals)					
Please list any dog you have owned in the past, (name, breed, how long owned, explain what happened to it, including the age it died or left you.)	_				
Dog Preference					
If you are interested in a specific dog please state the dog's name:					
Preferred gender: Preferred hair/coat type: Color preference?					
Preferred age range:Are you willing to accept a dog with special medical needs?					
Are you willing to accept a dog with a history of neglect/abuse who needs extra love and attention?					
Are you willing to accept a dog with behavior problems who requires special training?					
Would you consider a Dachshund mix or other small dog?					
How long are you willing to wait for a Dachshund?					
Care and Responsibility					
Approximately how many hours a day will your new dog be alone?	_				
Dachshunds are generally inside dogs & should not kept outside for long periods. How long will your new dog l)е —				
Who will have primary responsibility for the care of your new pet?					
When you travel who will care for your new pet?					
If you move, will your new pet go with you?					
Does everyone in your household want a Dachshund or other small dog?					
What is your definition of disciplining a dog?					
What will you do if someone in the household can't get along with your new pet?	_				
Under what circumstances would you give up your new pet?					

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Are you willing to ensu	re your pet stay	s vaccinated?	Leashed on walks?			
			eterinarian care (worming, annual shots) and non- g gets older?			
How much would you b	pe willing to spe	nd on medical ex	penses per year for your dog?			
References						
Please provide three names as referencesyour veterinarian can be one, other references could include relatives, neighbors, friends, or co-workers who have knowledge of you with your dogs, past or present.						
Name, Phone number	er, & relationsh	nip to applicant:				
1						
2						
3						
with adequate food Signature of Applicant:	, water, shelte	er, affection, ar				
			application approval does not guarantee that dog will			
For Administrative Us	se Only:					
Application Reviewed I	Зу:		Date:			
Application Status:	Approved	Disapproved	Reason disapproved:			
Dog Recommended:			Dog Adopted:			
Date adoption complet	ed:		-			
In the event a dog is re	turned:					
Date Dog Returned:		Reason Return	ed:			
Refund Due?	Amount?					
Date Refund Sent:		By Whom:_				