

Tiny Loving Canines, Inc.
ADOPTION APPLICATION for (name of dog):

Our questions and your answers are not meant to be intrusive – they are used to help us make the best match for you, your family, your lifestyle and the TLC dog or puppy!

Your name	
Age*	___ 18-23 ___ 24-32 ___ 33-45 ___ 46-55 ___ 56+
Your occupation	
Spouse/partner	
Age*	___ 18-23 ___ 24-32 ___ 33-45 ___ 46-55 ___ 56+
Spouse's occupation	
Ages of children at home?	
Do any small children visit your home on a regular basis?	___ Yes ___ No
Street Address	
City	
Zip	
Phone	
Cell	
Email address	<i>PLEASE print clearly!</i>

Home

Do you ___ own or ___ rent?
 Type of dwelling: ___ House ___ Condo ___ Apt. ___ Other: _____
 Type of backyard fencing: ___ Wrought Iron ___ Wood ___ Block wall ___ Combo
 Is there a gate? ___ Yes ___ No Is the gate locked? ___ Yes ___ No
 Who has access to the backyard? _____
 Do you have a pool or spa? ___ Yes ___ No Is it fenced in? ___ Yes ___ No

Existing pets

Name/breed/age:
 Name/breed/age:
 Are your pets spayed/neutered: ___ Yes ___ No
 Veterinarian's Name:
 Veterinarian's City & Phone #:

Have you ever had to give up a pet? ___ No ___ Yes If yes, why?

How many hours will the dog be alone per day? _____
 What will you do with the dog when you are not at home?

How did you hear about us? ___ Petfinder ___ Adopt-A-Pet ___ Pets 911 ___ Referral ___ Websurfing ___ PETCO

By initialing below, you acknowledge understanding and acceptance of the following:

I understand that a successful home visit is required prior to final placement. ___ (initial)
 I understand that upon adoption completion, I will take possession of my new dog within 2 days. ___ (initial)
 I understand that TLC activates the micro-chip registration in my name during the adoption process at their cost. ___ (initial).
 I understand that my adoption donation is tax deductible, not nonrefundable. ___ (initial)
 I understand that as a resident of Ventura County, I will be required to pay \$20 in addition to the adoption donation and TLC will transfer the dog's license to me OR that as a resident outside of Ventura County I am responsible to obtain proper licensing at my own expense. ___ (initial)

By my signature below, I certify that all statements above are true and correct.

Signature: _____

Date: _____

** We ask your age because Chihuahuas have a life span of 15-20 years if given proper vet care and good nutrition. Please consider the upcoming changes in your lifestyle in regards to the life span of the dog or puppy you would like to adopt.*