

Central Wisconsin German Shepherd Rescue

W11955 W.Townhall Rd. | Bowler, WI 54416

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Instructions to submit this application are at the bottom of the document.

Application for Adoption

Name: _____

Address: _____

City _____ State _____ Zip _____

eMail address: _____

Type of residence (circle one) House / Apartment / Duplex / Mobile Home / Other

Do you own your own residence? _____

If you rent or lease, a copy of the lease showing pet allowance will be required before adoption is finalized.

Daytime phone _____ Evening Phone _____ Work Phone _____

Please include your Area Code!

Employer _____ Length of employment _____

Please list 2 personal references that are not relatives

1. Name _____ Relationship _____

Address _____ Phone _____

2. Name _____ Relationship _____

Address _____ Phone _____

Do you have a regular veterinarian? Circle one: Yes / No Doctor's name _____

Clinic name _____ Phone _____

Address _____

If you do not have a veterinarian, you will be asked to obtain one before adoption is finalized.

Is there a specific dog on the website in which you are interested?

If so, what is the name of the dog? _____

Have you owned a German Shepherd before? circle: yes no

Please tell us a little about dogs that you've had: _____

What brand of dog food have you used for your present or previous pets? _____

We highly recommend every German Shepherd and it's owner attend an obedience training class.

What are your plans for training? _____

German Shepherds, like many other breeds, tend to have a lot of energy.

Exercise and containment plans have to be made.

Please tell us if you have any of the following - circle: Fenced Yard / Kennel / Dog Run

What are your plans to ensure proper exercise for your dog? _____

Approximately how many hours a day will your dog be alone ? _____

Do you plan on crating your dog? circle one: Yes No What's a crate ?

Please let us know your thoughts on crating - good or bad _____

We like to get to know our prospective families.

Please tell us a little about yours (how many people, ages, etc.): _____

Are all of your pets spayed or neutered? Yes No

Are all of your pets current on vaccinations? Yes No

Are all of your dogs tested for Heartworm and given preventative? Yes No

Do you administer regular flea and tick preventative to your pets? Yes No

If you answered NO to any of the above 4 questions, please explain:

What do YOU consider an acceptable reason for giving up a pet? _____

Please tell us about all the pets that you currently have in your family:_____

Do you plan on keeping the dog primarily (circle) Indoors / Outdoors

Please explain your plans:_____

Release:

By submitting this document, you are stating that all the information given herein is accurate and complete and that you are hereby giving your consent for CWGSR to verify any and all information contained herein. The completion of this form does not entitle you to any guarantee or rights. CWGSR will not be held liable in any way, for any dog or its actions, once the dog has been placed.

Signature_____

Date_____

** To submit your completed application you may send via US Mail to the address at the top of this document or attach it to an email and send it to the email address at the top of this document.*