

Greyhound Pets of America Senior Sanctuary of Florida
19520 Paso Fino Way
Dade City, FL 3523
727-430-0456/352-428-6161

Adoption/Foster Application

Greyhound Pets of America Senior Sanctuary (GPASS) wants both the greyhound and the greyhound owner to be happy. The ownership of a greyhound, like any pet, is a serious responsibility and requires **commitment for the lifetime of the pet**. It is our goal to make the best possible match between the greyhound and the prospective adopter and to be sure that this responsibility, as well as the financial and physical needs of each greyhound, is met in its new home. The answers you provide on this application will assist us to find the greyhound that is most suitable for your home and family.

Demographics

Name #1 _____

Name #2 _____

Address _____

City, State, Zip _____

Home phone/work/cell phone _____

Email address _____

#1 occupation; employer _____

#2 occupation; employer _____

Where/how did you become aware of GPASS? _____

Please tell us the event or Meet and Greet where you were introduced to our group _____

Have you applied currently/recently to any other adoption group? Which one? _____

What is your ideal greyhound? _____

About you and your family

Total number of adults living in the home _____

Ages _____

Total number of children living in the home _____

Sex _____

Age _____

Ages of any children/grandchildren who regularly visit _____

Are there any family members unsteady on their feet or who have special needs using assistance such as wheelchairs, walkers, canes. Please describe:

How many hours per day will your greyhound be home alone _____

Where will your greyhound stay when home alone _____

Who will be the primary caretaker of the greyhound _____

Where will the greyhound sleep? _____

Your home

In which type of home do you live (circle one) – house, apartment, townhouse, mobile home?

Own or rent(circle one)

How long at current address? _____

If in an apartment or homeowners association, do your governing documents or lease agreement have restrictions for pets? _____

Interior stairs: how many _____

Exterior stairs: how many _____

Fenced yard: type of fence, height at lowest point _____

Current pets in the home (living or frequent visitor)

Type/breed	Spayed/ neutered	Sex	Size	Age	Personality type *	Vacc current	Inside/ outside

*shy, aggressive, friendly, dominant, submissive

Previous pets you have owned

Type/breed	Spayed/ neutered	Size	Inside/ Outside	Time owned	What happened to pet

Your lifestyle

Does your family anticipate any major lifestyle changes in the next 12 months, i.e., retirement, travel, new baby, moving, new job/schedule, relocation?

What is the activity level of your household (circle one): quiet, moderately active, active, very active?

What do you consider a valid situation for relinquishing a pet (circle any that apply): barking, biting, chewing, digging, housetraining, allergies, divorce, large vet expenses, financial problems, house remodeling, having a baby, illness, job relocation, move to smaller home, marriage, too rough with children, fleas, other

GPASS is an adoption and support organization. Information regarding the current address of your greyhound(s) will assist us in proving support should your dog become lost. After you adopt, you may periodically be contacted by a GPASS representative to update our database with respect to the status of your dog. Are you willing to provide this information? _____

Your veterinarian

Name _____
Address _____
City, State, Zip _____
Telephone _____
How long have you been a client _____

References (not family members)

Name _____
Address _____
City, State, Zip _____
Phone # _____

Name _____
Address _____
City, State, Zip _____
Phone # _____

1. I agree and am aware of the importance of keeping a greyhound on led (not a flexi-leash) when not in an enclosed fenced area.
2. I agree and am aware that greyhounds must live inside the home and cannot be kept in an outdoor kennel/dog house. I agree and am aware that identification must be on my greyhound at all times.
3. I agree and am aware that a greyhound must **NEVER** be placed on a ti out chain. As they are sight hounds and can run up to 45 mph, this is a hazard as they can break their necks or have other serious injuries.
4. I agree and am aware that if no fenced area is provided in my home, that my greyhound must be leash walked.
5. I agree to keep all necessary vaccines/tests current as recommended and will keep my greyhound on heartworm prevention medications.
6. If for any reason I am unable to keep my greyhound, I agree to return him/her to Greyhound Pets of America Senior Sanctuary.
7. I certify that all information on this application is true and correct.
8. I grant permission to contact personal references and the veterinarian listed above.
9. By signing this application I am agreeing to the above terms and that all statements are true and correct.

Applicant

Co-applicant

The adoption fee of _____ is NON-REFUNDABLE. GPASS is non-profit organization staffed by volunteers and donations are fully tax-deductible and non-refundable.

Thank you for your interest in greyhound adoption. GPASS looks forward to working with you.

