

# Adoption Application

## Cascade Pembroke Welsh Corgi Rescue

The answers you give on this application will help us to find the best possible match between you and the dogs available through CPWCR. Please fill out both this and the Terms of Adoption forms *completely* and return to the address at the end.

Name \_\_\_\_\_ Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Street Address \_\_\_\_\_ Alternate Phone ( \_\_\_\_\_ ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Best time to call \_\_\_\_\_ Occupation \_\_\_\_\_

Personal reference: Name \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Relationship \_\_\_\_\_ How long known? \_\_\_\_\_

Do you live in a (circle): House / Apartment / Trailer / Condo / Other (fill in): \_\_\_\_\_

Do you (circle) own / rent your home?. If rent, do you have landlord's permission to have a dog? \_\_\_\_\_

Landlord's name \_\_\_\_\_ Landlord's phone ( \_\_\_\_\_ ) \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Do you have a fenced yard? \_\_\_\_\_ List fence height and type \_\_\_\_\_

Does fencing completely enclose a yard for a dog? \_\_\_\_\_

If no fence, how will you handle exercise and toilet duties? \_\_\_\_\_

Do you have a separate kennel run? \_\_\_\_\_ List height and size \_\_\_\_\_

How many adults in the household? \_\_\_\_\_ How many children? \_\_\_\_\_

Age and sex of children? \_\_\_\_\_

Are there regular visitors to your home, human or animal, with which your dog must get along? \_\_\_\_\_

Describe \_\_\_\_\_

Do you own other dogs? \_\_\_\_\_ Are they neutered? \_\_\_\_\_

Give breed, sex, and age of each: \_\_\_\_\_

Do you own cats? \_\_\_\_\_ How many? \_\_\_\_\_ Do you have any other animals? \_\_\_\_\_

Do you have a regular vet? \_\_\_\_\_ Vet's name \_\_\_\_\_

Vet's clinic, city, and phone number \_\_\_\_\_

How many dogs have you owned in the past 5 years? \_\_\_\_\_

Give breed(s) and if you still have the dog(s) \_\_\_\_\_

If not, what happened to the dog(s)? Be specific \_\_\_\_\_

Have you owned a Pembroke Welsh Corgi before? \_\_\_\_\_

Why did you choose this breed? \_\_\_\_\_

List all plans for this dog (circle) Pet / Obedience / Agility / Other \_\_\_\_\_

Would you prefer a male or female? (circle) Male / Female / No Preference \_\_\_\_\_

Color preference \_\_\_\_\_ Acceptable age range \_\_\_\_\_

Coat type preferred (circle) Regular / Fluffy / No preference \_\_\_\_\_

I would be willing to consider a suitable dog of a different (circle) Sex / Color / Age than that above.

Where will the dog spend the day? (circle) Loose indoors / Crate / Basement / Garage / Fenced Yard / Loose outdoors / Tied Out In Yard / Kennel Run / Other \_\_\_\_\_

How many hours, on average, will the dog spend alone? \_\_\_\_\_

Where will the dog spend the night? (circle) Loose inside / Crate / Basement / Garage / Fenced Yard / Loose outdoors / Tied Out In Yard / Kennel Run / Other (describe) \_\_\_\_\_

Are any family members allergic to dogs? Describe \_\_\_\_\_  
 Do all family members want to adopt a dog? \_\_\_\_\_ If no, describe \_\_\_\_\_  
 Do you understand that CPWCR requires all dogs to be neutered? \_\_\_\_\_  
 Do you agree to license an adopted dog and give regular health care? \_\_\_\_\_  
 Do you agree to contact CPWCR if you can no longer keep this dog? \_\_\_\_\_  
 Would you be willing to let a representative of CPWCR visit your home by appointment? \_\_\_\_\_  
 If no, why not? \_\_\_\_\_  
 How did you hear about CPWCR? \_\_\_\_\_

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All of the information I have given is true and complete. Should an unneutered dog be placed with me, I agree to have it neutered within one month of adoption or by a date agreed upon by me and a representative of Cascade Pembroke Welsh Corgi Rescue (CPWCR). This dog will reside in my home as a pet. I will provide it with adequate food, water, shelter, training, affection, and medical care. I understand that CPWCR is a referral service and is not responsible for the accuracy of information received about the temperament, habits, or physical condition of dogs available for adoption. I understand it its my responsibility to see and evaluate the dog for myself before agreeing to adopt it. I am in full agreement with these terms for adoption. Cascade Pembroke Welsh Corgi Rescue is in no way liable or responsible for any damage, accident, or injury resulting from the placement of a dog into my household.

Applicant Signature	Parent signature if applicant is under 18 years of age	Date
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**We Reserve The Right To Refuse Any Applicant**

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Thank you for contacting CPWCR. One of our representatives should be in touch with you shortly after receiving your paperwork. If you have not received a response (by telephone, mail, or email) in 10 working days, call CPWCR at 360-456-1226 **after** 7:30PM or send an email to stlh20@earthlink.net. Leave your name and telephone number. In most cases you will be contacted before this call becomes necessary, but some of our volunteers handle a great deal of paperwork. This way we can be certain that yours gets the prompt attention it deserves.

**Please mail this and Terms of Adoption forms to:**

Mary Day, CPWCR  
 5447 - 89th Ave. SE  
 Olympia, WA 98513

CPWCR Mission: Cascade Pembroke Welsh Corgi Rescue is a non-profit organization dedicated to placing unwanted purebred Pembroke Welsh Corgis in suitable homes, and preventing more unwanted purebreds from overloading the shelter system. Towards attaining those goals, we promote responsible dog ownership by educating the public in the selection, care, and training of these dogs. CPWCR works cooperatively with Seattle Purebred Dog Rescue (SPDR), breeders, animal shelters, and individuals to accomplish this purpose.

# Terms of Adoption

## Cascade Pembroke Welsh Corgi Rescue

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**Please read and sign this form and submit it to CPWCR with the Adoption Application. If I am successful in the adoption of a dog through the Cascade Pembroke Welsh Corgi Club (CPWCR) I agree to the following conditions:**

1. To keep this dog in my personal possession, and to provide sufficient food of good quality, water, shelter, grooming, and humane treatment at all times.
2. To spay or neuter this dog within 30 days of adoption at my expense if the dog is not already neutered. Proof of neutering will be provided in writing to CPWCR within ten days of surgery. I will not allow this dog to breed or be bred in any circumstances.
3. To procure veterinary care at once if this dog becomes sick or injured, and to keep current on all vaccinations as recommended by my dog's veterinarian.
4. To provide this dog with an ID tag secured to a buckle collar which will be worn at all times. A choke collar will never be left on the dog unless the dog is on a leash held by a person. In addition, CPWCR recommends tattooing and/or microchipping as a means of permanent identification.
5. To obey any and all animal control regulations governing the area in which I live, and to license this dog according to such regulations within one month of adoption.
6. Not to sell, trade, transfer ownership, abandon, or otherwise dispose of this dog in any way, but to notify CPWCR if I must relinquish custody of the dog. This includes release to family members.
7. To allow a CPWCR representative to examine the dog and it's living conditions, and to surrender it to said representative for return to CPWCR if conditions are found to be unsatisfactory.
8. To assume full responsibility for this dog's actions, including any damage done by this dog.
9. To keep this dog as my household pet and companion. To ensure that when outside and unattended, the dog is in a securely fenced yard or kennel run with adequate shelter from the weather. To exercise him or her on leash or within a fenced yard, and never to allow the dog to run loose without adequate adult supervision. To never chain or tie this dog without being in attendance.
10. To never allow this dog to be transported in the open bed of a pickup truck or similar vehicle without being properly secured, in accordance with Washington State law.

I hereby agree to abide by the Terms of Adoption listed above:

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Parent signature if applicant  
is under 18 years of age

\_\_\_\_\_  
Date

**You signature on your Adoption Application indicates that you agree to the above Terms of Adoption. Keep this form carefully filed for your future reference.**