

# *Mavroudis Poodle Rescue Inc.*

## *Application*

Foster

Adopt

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, state, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate number: \_\_\_\_\_

Email: \_\_\_\_\_ Employer: \_\_\_\_\_

Your Home:

Own

Rent, if rent, house, apartment, townhome

• Are you allowed pets?

Yes

No

If yes, is there a weight limit? \_\_\_\_\_

• Do you have a pet deposit?

Yes

No, we verify all pet deposits prior to adoption

• Name and number of landlord/apartment complex:

\_\_\_\_\_  
\_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_

**Do you have a fence?**

- Yes, if yes, circle all that apply: Wood/Chain-link/ Underground/  
4ft/5ft/ 6ft chain link. 5.5 feet. Underground in the front yard.
- No

**How will the dog be let out?**

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**Do you travel often?**

- Yes, If yes, how often?
- No

**Family Members:**

• **Children(ages): \_\_\_\_\_ Are they experienced with pets?**

- Yes
- No

**Current pets: \_\_\_\_\_ Are they spayed/ neutered (circle all that apply)**

**If none, have you had a dog previously**

- Yes
- No

**Who is your veterinarian?**

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**Clinic name: \_\_\_\_\_ Phone number:**

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- Are all pets living in your home current on vaccines?
- Yes
- No

Has a dog died on your premises in the past 3 months from  
Distemper/Parvo/Unknown causes

Yes

No

Is anyone in the household allergic:

Yes

No

Does the entire family want a new pet?

Yes

No

Your new pet:

Why do you want a new dog? Gift/companion/ watchdog/other:

explain: \_\_\_\_\_

Do you want your new dog to be primarily

Indoor/outdoor ? \_\_\_\_\_

\_\_\_\_\_

Where will your dog

sleep? \_\_\_\_\_

\_\_\_\_\_ Where will your dog be when you are not home?

\_\_\_\_\_

Who will handle feeding?

\_\_\_\_\_

Are you willing to obedience train?

\_\_\_\_\_

How do you feel about spaying/ neutering?

\_\_\_\_\_

Are you financially prepared to care for a dog for 10-15 years (food, medical, etc.)

\_\_\_\_\_

Are you aware of crate training?

- Yes
- No:
- Are you willing to use this method? Yes/ No (circle one)

**Are you aware of heartworms, heartworm prevention and cause?**

- Yes
- No

**Are you aware of our county's leash laws?**

- Yes
- No

**Would you agree to bring any current pets to a neutral location for a meet up?**

- Yes
- No

**Would you agree to an in-home visit by an MPR volunteer after adoption?**

- Yes
- No

**Preferences:**

**Age: puppy/juvenile/adult/geriatric (circle all that apply)**

**Sex: male/female (circle all that apply)**

**Size: <10#/ 11-30/30-60# (circle all that apply)**

**Please fill out this form completely so that we can help you find the best possible pet for your family**