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| Robert E. Williams Animal Rescue Inc. Adoption Application |

Robert E. Williams Animal Rescue Inc.

P.O. Box 10937

Fairfield, N.J. 07004

[www.rewar.org](http://www.rewar.org)
 **Please email completed applications to:** **rewar811@gmail.com**

Please read and answer all questions fully. Our application is lengthy as owning an animal is a life time commitment. Serious thought and consideration should be given before deciding to adopt. Many of these animals have been through very difficult times and it is our responsibility to find the best home possible. Robert E. Williams Animal Rescue (REWAR) maintains the right to decline an application for any reason.

## Adoption Fees

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| **Dog**  | **$375** *includes up-to-date shots, transportation to New Jersey, and spay/neuter (if old enough)* |
| **Cat** | **$125** *includes up-to-date shots and spay/neuter (if old enough)* |

## Contact Information

|  |  |
| --- | --- |
| Full Name |  |
| Occupation |  |
| Street Address |  |
| City, State, Zip code |  |
| How long at this address? |  |
| Daytime Phone |  |
| Evening Phone |  |
| Best time to call |  |
| Email Address |  |

## Animal You Are Applying to Adopt:

|  |  |
| --- | --- |
| Name |  |
| Sex |  |
| Breed |  |

## Questionnaire

|  |  |
| --- | --- |
| 1 | For whom are you adopting the pet? \_\_\_self \_\_\_ gift \_\_\_other family member Please explain |
| 2 | Is everyone in the household in agreement with the decision to adopt a cat/dog?  |
| 3 | Does anyone in the family have a known allergy to cats/dogs?  |
| 4 | What is your typical day/schedule like: |
| 5 | What do you think are the most important responsibilities in owning a pet are? |
| 6 | Do you have time to provide adequate love and attention? |
| 7 | Have you ever had an application declined for adoption of an animal from an animal welfare group/animal control facility? \_\_\_yes \_\_\_no If yes explain: |
| 8 | Why do you want to adopt? |
| 9 | How soon are you ready to adopt? |
| 10 | What is your idea of an ideal cat/dog and why? |
| 11 | Willing to adopt (skip if applying to adopt a cat): \_\_ Outgoing/hyper dog \_\_ Shy dog \_\_ Dog that needs regular medication \_\_ Dog that needs training \_\_ Dog that needs grooming \_\_ None of these |
| 12 | Willing to adopt (skip if applying to adopt a dog): \_\_ Outgoing/hyper cat \_\_ Shy Cat \_\_ Cat that needs regular medication \_\_ Cat that needs training \_\_ Cat that needs grooming \_\_ None of these |
| 13 | Are you willing to take the time to housebreak? Do you understand that a change in environment may cause the pet to have accidents? \_\_\_yes \_\_\_no |
| 14 | Under what circumstances whether personal or pet related would cause you to relinquish ownership of the pet (eg: children, divorce, marriage, relocation, pet aggression or illness). |
| 15 | If a behavioral problem arises, what steps will you take to work on it? |
| 16 | Who will have primary responsibility for this cat/dog’s daily care? |
| 17 | Who will have financial responsibility (including emergency care) for this cat/dog? |
| 18 | Do you plan to use a crate? What do you think about crating?  |
| 19 | When you are home, where will the pet be kept? |
| 20 | How many hours will the dog be left unattended (i.e., workday)? |
| 21 | When no one is home (i.e. at work, shopping), where will the pet stay (be specific)? |
| 22 | Where will the pet sleep at night? |
| 23 | How often will you exercise the dog and for approximately how long? |
| 24 | When the dog goes out, how do you plan to supervise it?  |
| 25 | Do you agree to keep the cat/dog as an indoor cat/dog? \_\_\_yes \_\_\_no |
| 26 | How often do you travel? What will you do with the pet when you travel? |
| 27 | If you move, what will you do with the dog? |
| 28 | Do you have any prior experience in pet ownership? Please explain: |
| 29 | Please list all pets in the household including type, breed, age, temperament and sex: |
| 30 | Are these pets spayed/neutered? \_\_\_yes \_\_\_noIf no, why not?  |
| 31 | Are these pets up to date on vaccines?\_\_\_yes \_\_\_no |
| 32 | How do you discipline your pets and why? |
| 33 | Do you have a regular veterinarian? \_\_\_yes \_\_\_noName of vet: Clinic Name: Clinic Address: Clinic Phone Number: \*Providing REWAR with this information you are allowing REWAR to call your vet. **Please call your vet and ask them to authorize the release of information to REWAR.** |
| 34 | Will/can you use preventative medicines such as flea/tick and heartworm?\_\_\_yes \_\_\_no |
| 35 | What type of food do you plan to feed your new pet? |
| 36 | Have you every surrendered a pet? If so, why? |
| 37 | Have you ever had a pet euthanized? If so, why? |
| 38 | Have you ever lost a pet to an accident? |
| 39 | Please list names, ages and relationship of every person who lives in your house: |
| 40 | What type of home do you live in single family, town home, apartment, farm, etc.? |
| 41 | Please describe your household: \_\_ Active \_\_ Noisy \_\_ Quiet \_\_ AverageDescription:  |
| 42 | Do you own or rent your home: |
| 43 | If you rent, please give the rules governing pets and the landlord’s name and number: |
| 44 | Is the yard fenced? |
| 45 | Does the fence belong to you, or to neighbors? |
| 46 | Do you have a pool? Is it fully fenced in? |
| 47 | Are you willing to let a representative of REWAR visit your home by appointment? \_\_\_yes \_\_\_no |
| 48 | Are you aware REWAR requires all dogs/cats in a home be spayed/neutered? \_\_\_yes \_\_\_no |
| 49 | Are you aware that the adoption fee is nonrefundable? \_\_\_yes \_\_\_no |
| 50 | Do you agree to contact REWAR if you can no longer keep this cat/dog? \_\_\_yes \_\_\_no |
| 51 | Any other information you would like to provide: |
| 52 | How did you hear about REWAR? |

## Personal References

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Phone |  |
| Relationship (relative, neighbor, friend, etc) |  |
|  |  |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Phone |  |
| Relationship (relative, neighbor, friend, etc) |  |

## Agreement and Signature

All the information I have given is true and complete. I have read the above information carefully and have filled out this application honestly. I understand that omission of information and/or failure to answer all questions and sign the application can result in this application being declined. Also, if an omission or untruth is discovered after an adoption takes place, I understand that the Robert E. Williams Animal Rescue (REWAR) reserves the right to annul the adoption and reclaim the animal. I give the REWAR permission to fully investigate the information provided as well as contact veterinarians and related officials. If the application passes this review, I agree to a home and yard visit on a mutually agreed date by a REWAR volunteer before an adoption decision is made.

This dog/cat will reside in my home as a pet. I will provide it with quality dog/cat food, plenty of fresh water, indoor shelter, affection, annual physical examination and vaccinations under the supervision of a licensed Veterinarian. If for any reason I can no longer keep the cat/dog/animal, I agree to contact Robert E. Williams Animal Rescue immediately.

In addition, I understand the adoption decision is dependent on many factors, including but not limited to the compatibility of the family and home to the individual animal, and other applications received on this animal. I understand it is REWAR’S prerogative to decide which home is most appropriate and that their decision is final, and therefore I will not argue with the decision. Unless otherwise indicated by REWAR, I am free to apply and undergo the application process in the future.

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| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

**Please email the entire completed application to:** rewar811@gmail.com