



Hog Lane
Ashley Green
Chesham
Buckinghamshire
HP5 3NX

Tel. No. 01442 876009
24 hr answerphone 01494 791467

ADOPTION APPLICATION

Date of application _____ VISIT/POST/TELEPHONE _____
Name _____ (Mr/Mrs/Miss/Ms) Tel.No. Home _____
Address _____ Work _____
_____ Mobile _____
_____ Post Code _____

ID Provided: _____ Email Address _____
(Credit card or utility bill < 3 months old, child benefit book, pension book, driving licence, passport, warrant or services card)

- (a) Are you ready to start adoption proceedings immediately ? YES/NO
(b) Have you got a holiday/house move planned ? YES/NO
(c) Have you or any member of your family ever been banned from keeping an animal ? YES/NO

If you answered yes to question (b) or (c) please give details _____

Home Environment Flat House Rented Other (please specify) _____

Approx. size of garden facilities (if any) _____

Height of any fencing _____ Description of fencing _____

Where will the dog be expected to sleep ? _____

How much exercise can be offered ? _____

How long would the dog be left ? a.m. _____ p.m. _____

Name & address of vet (if any) _____

Will the dog come into contact with

- Children (your own or those visiting) ? Number _____ Ages _____
How often: Daily _____ Often _____ Occasionally _____
- Cats ? _____
- Other pets/livestock ? (please specify) _____
- Other dogs in the household? Sex _____ Age _____ Type _____
- Regular contact with other dogs. YES/NO. If Yes please specify _____

Please indicate if you or any family members have had allergic reactions to dogs or have medical conditions which may have a bearing on the choice of dog?

PLEASE TURN OVER

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Details of dog required **Please circle all that apply where appropriate**

Age: From (approx) _____ To (approx) _____

Size: Small (*Westie or smaller*)
 Medium (*Collie size*)
 Large (*G.S.D.. size and above*)

Type: Pedigree Crossbreed

Sex: Dog Bitch Either

Coat: Short Medium Long

Preferred breeds if any : _____

Are there any sorts of dogs you would not want to hear about ? (please state) _____

What breeds of dogs have you had before ? _____

What other rescue centres have you approached and when ? _____

How did you find out about us ? Can we approach you at a later date for
Family/Friend Yellow Pages Internet publicity purposes ? YES/NO

Other (Please specify) _____

I have made my minimum £1 donation for registration (please put the money in one of the collecting tins)

Signed: _____

The data that you provide will be used in accordance with the Data Protection Act 1985, and will not be passed to any other organisation. The details will only be used by Chilterns Dog Rescue Society.

Application seen by: _____

Additional information _____

Form updated _____

