

Greyhound Pets of America

Cape Girardeau Chapter



P.O. Box 781
Cape Girardeau, Missouri 63702
www.gpacapemo.org
info@gpacapemo.org

ADOPTION APPLICATION

Greyhound Pets of America wants both the greyhound and the greyhound owner to be happy. It is our goal to make the best possible match between the greyhound and their prospective adopter. The answers you provide on this application will assist us in finding a greyhound best suited for your particular home.

DATE: _____

Note: If there is more than one adult in the household, each person must complete the information below.

Applicant Name: _____

Home Address: _____

Home Phone: _____

Applicant Age: Under 20 ___ 20-30 ___ 30-40 ___ 40-50 ___ 50-60 ___ 60-70 ___ Over 70___

Occupation: _____

Employer: _____

Work Address: _____

Work Phone: _____

Applicant E-Mail: _____

Would it be possible to contact you at work? YES NO What time? _____

Co-Applicant Name: _____

Co-Applicant Age: Under 20 ___ 20-30 ___ 30-40 ___ 40-50 ___ 50-60 ___ 60-70 ___ Over 70___

Occupation: _____

Employer: _____

Work Address: _____

Work Phone: _____

Co-Applicant E-Mail: _____

Would it be possible to contact you at work? YES NO What time? _____

About You and Your Family

Total number of adults living in the home? _____ Total number of children living in the home? _____

Names and Ages* of children in the home? _____

Names and Ages of children/grandchildren that regularly visit? _____

Are your children/grandchildren knowledgeable about pets? _____

Are there any family members unsteady on their feet or who have special needs using assistance such as a wheelchair or walker? _____ If so, please explain _____

Please note that if you have children under the age of 8, you will be encouraged to read the book Childproofing Your Dog by Brian Kilcommons. We also do not regularly adopt to families with children under the age of 3. However this may be decided upon a case-by case basis.

Have you or your family ever seen or met a greyhound? _____

Where? _____

Are all applicants and family members in total agreement with adopting a retired racing greyhound? _____

Your Home

In which type of area do you live? (Circle one) Rural / City / Suburban / Other
 In which type of home do you live? (Circle one) House / Apartment / Townhouse / Mobile Home
 Do you own or rent? _____ How long have you been at your current address? _____
 If in an apartment or a homeowners association, do you have written permission for a large dog over 55 pounds? _____
 Prior to adoption we will need to contact your landlord/property manager, please include their name and a telephone number _____
 Are there interior stairs in your home? _____ How many? _____
 Are there exterior stairs at your home? _____ How many? _____
 Do you have a fenced yard? _____ Fence height at lowest point _____
 Are any fence alterations/repairs needed? _____
 Approximate size of fenced yard? _____
 Do you have a swimming pool? _____ Lake, pond or river in or near your yard? _____

Please list the CURRENT pets you have in your household:

Type*	Breed	Spayed/Neutered (yes or no)	Gender	Approximate Weight	Age	Personality**	Vaccines Current	Indoor or Outdoor

*Type= dog, cat, bird, reptile, etc.
 **Personality=shy, aggressive, friendly, dominant, submissive

Please list the PREVIOUS pets you have owned:

Type*	Breed	Spayed/Neutered (yes or no)	Gender	Approximate Weight	Indoor or Outdoor	Years Owned

What happened to pet(s) and at what age? _____

If you need additional space to inform us about your previous pets, please attach another page.

On a scale of 1-5, please rate yourself:
 Not very dog experienced 1 2 3 4 5 Extremely Dog Knowledgeable

Your Lifestyle

Does your family anticipate any major lifestyle changes in the next 12 months?
 (examples: retirement, travel, new baby, moving, new job/schedule change) _____

What is the activity level of your household? (Circle one) Quiet / Moderately Active / Active / Very Active
 What are the hours that an adult is home during the day? _____
 How many hours per day will your greyhound be left alone? _____
 Are there any rooms your greyhound will not be allowed in? _____
 Where will your greyhound sleep at night? _____
 Most greyhounds are 2 to 5 years old when available to adopt. Would you consider adopting a greyhound that is 6 to 9 years old? (Circle one) Yes / No

What do you consider valid reason for giving up a pet? (Circle all that apply)

Allergies	Financial Problems	Illness	Downsizing Home
Divorce	House Remodeling	Job Relocation	New Marriage
High Expenses	Having a Baby		
Other _____			

Your Veterinarian

Name: _____

Address: _____

City, State. Zip _____

Telephone: _____

How long has your veterinarian been treating your pet(s)? _____

We will be contacting your vet if you have pet(s) in your home currently.

Your References

Please list two references (not family members) that you have known for over three years.

Name: _____

Address: _____

City, State. Zip: _____

Telephone: _____

Name: _____

Address: _____

City, State. Zip: _____

Telephone: _____

1. Do you agree to always keep your greyhound on a leash or within a fenced area? YES NO
2. Do you intend for your greyhound to live in the house with you? YES NO
3. Do you agree to keep your greyhound exclusively as a house dog and agree to never use him/her for commercial racing, breeding, laboratory research or anything other than as a family pet? YES NO
4. Do you agree to keep a collar bearing identification on your greyhound at all times and to notify your local GPA chapter at once if your greyhound should ever get lost? YES NO
5. Do you agree to notify GPA if you cannot keep your greyhound and to never give your greyhound to a pound, shelter or any other person or group without permission from GPA? YES NO
6. Do you agree to keep your greyhound on heartworm preventative and to keep your greyhound current on all vaccinations? YES NO
7. Do you agree to promptly answer a questionnaire on how your greyhound is doing? YES NO

I certify that the above information is true and complete.

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

**Please return this application to:
Greyhound Pets of America – Cape Girardeau, MO
P.O. Box 781
Cape Girardeau , MO 63702
ATTN: Adoption Committee**

If you have any questions, please contact us:

www.gpacapemo.org

info@gpacapemo.org

573-334-7088 or 573-334-7088 fax (call first)