Contact Information

First Name:	Last Name:		Age:	
Co-owner First Name:	Co-owner Last Name:		Age:	
Telephone (day):	Telephone (home):		Cell:	
Address:	City:	State:	Zip:	
E-Mail Address:				
Name of dog(s) you are applying for:				
Questionnaire				
Number and ages of children living with you:				
Why do you want a rescued Aussie?				
Previous experience with Aussies?				
Describe your idea of a great Aussie.				
Have you owned other dogs before? Yes No				
If Yes, for how long and why do you no longer own them?				
Pets presently at home, include breed, age and sex of dog:				
What veterinary hospital do you currently use or have you used in the past?				
Can we contact them as a reference on care of your current or prior pets? \square Yes \square No				
Are the pets you have at home spayed or neutered? Yes No				
Have you ever owned a dog with behavior or training problems? Yes No				
If Yes, how did you deal with the problems?				
Have you ever trained a dog for obedience or any other dog sport or activity? Yes No				
If Yes, to what level did you train, where did you train (name of trainer or school) and when?				
Do you have any strong preference as to the age of the dog? \square Yes \square No				
If Yes, Please explain:				
Do you have a strong preference as to the sex of the dog (all dogs are spayed or neutered)? Yes No				
If Yes, please explain:				
Are you committed to caring for this dog for his/her lifetime (about 15 years)?				
What is your plan if you become unable for whatever reason to take care of your Aussie?				

www.aussiefriendsrescue.com Adoption Applicant Screening

Have you ever had a dog put to sleep or given him/her away? Yes No If Yes, please explain: Do you understand that Aussies are active dogs? Yes No What type of activities do you plan to do with your Aussie? Will the dog be inside/outside during the day? At night? Will anyone be home with the dog during the day? Yes No Daily work hours? Do you have a Doggie Door? Yes No Is your yard fenced? Yes No If Yes, type of fencing and height? Do you have a swimming pool? Yes No If Yes, is it fenced? Yes No You live in:			
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Do you have a Doggie Door? Yes No Is your yard fenced? Yes No If Yes, type of fencing and height? Do you have a swimming pool? Yes No If Yes, is it fenced? Yes No You live in: Own home Rental home Apartment/Condo Urban Suburban Rural I am willing to pay an adoption fee? References First Name: Last Name: Telephone (day): First Name: Last Name: Telephone (day): Telephone (home): You live in: Own home Rental home Apartment/Condo Urban Suburban Rural I am willing to pay an adoption fee? References First Name: Telephone (home): Yes No You live in: Rural Rural I am willing to pay an adoption fee? References First Name: Telephone (home):	Will anyone be home with the dog during the da	ay? 🗌 Yes 🔲 No	
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Places amail your application to iana@aussiafrianderessus com	Signature:	Date:	
	Diago amail your application t	or iano@aucciofrionderoccus com	

Please email your application to: jane@aussiefriendsrescue.com

Or mail to:

Aussie and Friends Rescue

P O Box 121 Payson, AZ 85547

We thank you for your interest in giving a Aussie a second chance at a wonderful life. You will be contacted once your application has been reviewed for further information.