



P.O. Box 94 | Meadowlands, PA 15347  
 390 Old Hickory Ridge Rd. | Washington, PA 15301  
 724-229-7053 | www.angelridgeanimalsrescue.org

Date \_\_\_\_\_

Dog \_\_\_\_\_

Breed \_\_\_\_\_

Sex \_\_\_\_ Age \_\_\_\_ Fee \_\_\_\_\_

Microchip \_\_\_\_\_

## DOG FOSTER-TO-ADOPT APPLICATION

### ADOPTER INFORMATION

Name \_\_\_\_\_ Tel \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Driver's Lic. # \_\_\_\_\_ Are you over 21? Y  N

Employer \_\_\_\_\_ Supervisor's Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Hours at Work Per Week (If Employed) \_\_\_\_\_

**OTHER RESIDENTS' INFORMATION** —  Spouse  Partner  Roommate

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Hours at Work Per Week \_\_\_\_\_ No. of adults in home \_\_\_\_\_

No. of children in home \_\_\_\_\_ Ages \_\_\_\_\_ Have they lived with dogs? Y  N

Describe any problems \_\_\_\_\_ Is anyone at home allergic to dogs? Y  N

### PERSONAL REFERENCES (THREE)

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

### VETERINARIAN INFORMATION

[ Current Vet:  or Future Vet:  ]

Name \_\_\_\_\_ Clinic/Office \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

### DESCRIBE YOUR EXPERIENCE WITH DOGS

Why do you want a dog? \_\_\_\_\_

Why did you choose this dog or breed? \_\_\_\_\_

Have you owned this breed mix? Y  N  Can you commit to care for the dog's entire life? Y  N

Have you had a dog that did not work out for you? Y  N  What happened to it? \_\_\_\_\_

Have you owned dogs in the last 10 years? Y  N  What happened to them? \_\_\_\_\_

Does your family have sufficient time and resources to meet this new dog's needs? Y  N

## OTHER PETS

How many dogs do you have? \_\_\_\_\_ Breed Mix \_\_\_\_\_ Ages \_\_\_\_\_ Sex \_\_\_\_\_

Where did you get them?  Breeder  Pet Store  Inherited  Stray  Other: \_\_\_\_\_

Adopted from \_\_\_\_\_ Shelter/Rescue. Are all dogs spayed/neutered? Y  N

List all other pets in the home \_\_\_\_\_

Any behavior problems? \_\_\_\_\_ Have they lived with dogs? Y  N

## YOUR HOME

Type of home:  Apartment  Townhouse  Duplex  Single Family  Mobile Own or Rent? \_\_\_\_\_

I have permission to have a dog from (*Landlord & Tel*) \_\_\_\_\_

Front Yard is Completely Fenced Y  N  Height \_\_\_\_\_ Back Yard is Completely Fenced Y  N  Height \_\_\_\_\_

How and where will dog relieve itself? \_\_\_\_\_

Are there any community restrictions on dogs? Y  N  (describe) \_\_\_\_\_

## THE DOG'S LIFE

How many days and daylight hours will your dog be alone? \_\_\_\_\_

What will your dog be doing when alone at home? \_\_\_\_\_

Where will your dog spend the days?  Secure Room  Crated  Finished Basement  Unfinished Basement

Garage  Porch  Yard  Tied Outside  Dog House  Kennel Run  Free Roaming in House

Share  
more  
details  
with us:

Where will your dog spend the nights?  Secure Room  Crated  Finished Basement  Unfinished Basement

Garage  Porch  Yard  Tied Outside  Dog House  Kennel Run  Free Roaming in House

Other Area (describe): \_\_\_\_\_

What activities do you plan for your dog? (*check all that apply*)

Daily Walks  Jogging  Swimming  Dog Park  Dog Day Care  Other: \_\_\_\_\_

Will you be taking obedience class Y  N  Describe other type of training? \_\_\_\_\_

How will your dog be cared for when you are on vacation? \_\_\_\_\_

Any other  
general information  
you would like  
us to know:

## HOME VISIT

I agree to allow an Angel Ridge representative to visit my home by appointment, if necessary.

## Foster-to-Adopt Agreement

In consideration of this opportunity to volunteer as a foster parent, I agree to the following terms and conditions, intending to be legally bound by them:

1. I will abide by the mission rules, regulations, policies and programs of ARAR while I am a volunteer.
2. If I stop being a volunteer for ARAR for any reason, or upon ARAR's request at any time, I will promptly return all of ARAR's supplies, equipment, records, moneys, and other items in good, clean condition. If I am fostering an animal through ARAR and, for whatever reason, I am asked to return the animal to ARAR, I agree to return the animal immediately to ARAR or any person designated by ARAR.
3. I assume the risks of being bitten, scratched, injured, or frightened by cats, kittens, dogs and puppies in connection with my volunteer work for ARAR. ARAR is not liable to me for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever, which I might suffer or sustain in connection with the performance of my volunteer activities for ARAR. I will indemnify, defend and hold ARAR harmless from and against any claims, lawsuits, injuries, damages, losses, costs or expenses whatsoever, sustained by any companion animal or any person in connection with my intentional misconduct or grossly negligent performance of volunteer activities for ARAR, or my breach of ARAR's rules, regulations, policies and programs.
4. I understand and agree that ARAR may refuse volunteer applications for any reason.
5. If I will be sheltering or providing foster care or boarding any of ARAR's animals in my home or business, I consent to ARAR visiting my home or business from time to time to observe the animals in their living quarters.
6. **As a Fosterer/Volunteer through ARAR I/we hereby forever release, discharge and covenant to indemnify and hold harmless ARAR, and any other person, organization, firm or corporation charged or chargeable with responsibility or liability for any and all claims, damages, costs, expenses, loss of services, actions and causes of action arising out of any act or occurrence related to volunteer activities with, or fostering an animal through ARAR. This Indemnification shall apply to the Fosterer/Volunteer, their heirs, administrators, executors, successors and assigns.**
7. In the event that, while fostering a dog or puppy through ARAR, I wish to adopt the dog or puppy, I agree to complete and submit the ARAR Adoption Agreement and further agree that I will have no ownership interest in the dog or puppy until such time as the Adoption Agreement is approved and accepted by ARAR.
8. I have accurately and truthfully completed this Volunteer Application and Agreement.
9. Any Modification to this Agreement must be in writing signed by both parties. This Agreement is binding upon ARAR, me and ARAR's and my respective heirs, successors, assigns, executors and personal representations.
10. In the event that the dog has any medical problem or injury during the FTA period, you agree to contact us immediately. At our discretion, we will take the dog back to ARAR for treatment, or seek appropriate veterinary care. If you choose to take the dog to a veterinarian during the FTA period, you will be solely responsible for the charges. The adoption counselor will provide you with an emergency contact phone number.

## ARAR Indemnification Agreement

I agree to indemnify and hold harmless Angel Ridge Animal Rescue (ARAR), its Officers, Directors or Members, Agents and Representatives, for all manner of actions and causes of actions, suits, debts, dues, accounts, bonds, covenants, contracts, agreements, judgments, claims and demands whatsoever, arising out of my possession and placement of this dog. In addition, ARAR cannot be held responsible for the conduct, behavior or disposition of this dog after placement.

Angel Ridge Animal Rescue has undertaken no investigation with regard to the history or physical condition of this dog and makes no warranties or guarantees, express or implied, with regard to this dog, its background, suitability or compatibility.

All information provided in this application is true and correct. If any information changes, I/we will advise you promptly.

Foster/Adopter Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Foster/Adopter Signature: \_\_\_\_\_ Date: \_\_\_\_\_

ARAR Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ARAR ENFORCES THE TERMS AND CONDITIONS OF THIS AGREEMENT**

# ANGEL RIDGE ANIMAL RESCUE ADOPTION AGREEMENT *(complete on the day dog leaves)* (7-18)

**1. The Dog:** We are placing the described dog or puppy: \_\_\_\_\_ with you as a pet in your household.

**2. Sterilization:** The sterilization of the dog is a requirement of our adoption process. If the dog has not been sterilized prior to adoption, you agree to comply with the appointment that is scheduled for the dog/puppy with our veterinarian.

**3. Adoption Fee:** We require an adoption fee of \$175 for adult dogs and \$200 for puppies (unless otherwise indicated above). The adoption fee is not refundable. In some circumstances we may agree to allow you to select another dog/puppy.

**4. No Representation: Most of the dogs at Angel Ridge Animal Rescue have come to us as strays or rescues from dangerous or undesirable situations. You agree that we make no representations or guarantees about the physical condition, personality, or temperament of the dog.**

**5. Care of the Dog:** You are adopting the dog or puppy to be an "inside" dog that is housed within your home. You agree to provide the dog with access to the living quarters of your house, fresh water 24 hours a day, adequate dog food, and outdoor exercise. You will walk the dog on a leash or place the dog in a protected area or other enclosed outdoor area and never allow the dog to run free in an unsupervised manner. You will treat the dog as a household companion and family member. You will not confine the dog or puppy for extended periods of time. You agree to never use the dog or puppy for fighting, as a guard dog where aggressive behavior is encouraged, or as an animal whose primary job is hunting.

**6. Veterinary Care:** You agree to have the dog seen by your veterinarian at least on a yearly basis. In case of illness or injury you agree to seek prompt veterinary care. You agree to keep all required vaccinations current. You consent to us inquiring with your veterinarian about your previous experiences with dogs or the status of this dog.

**7. Transfer; Euthanasia:** You agree not to abandon, give away, sell, or dispose of the dog in any way, and to notify us immediately at any time you determine you no longer want to, or no longer can, keep the dog, so that we can take the dog back to arrange another adoption. You agree that you may never surrender the dog to an animal shelter. You agree that you may not euthanize the dog except in the case of the dog's terminal illness or injury, or old age accompanied by pain and suffering and in that case, the euthanasia must be performed by a licensed veterinarian in a private clinic or hospital.

**8. Lost Dog:** You agree to make a serious effort to find the dog if it becomes lost, by immediately (a) filing lost reports with the local police, animal control authorities, animal shelters, SPCAs, and local veterinarians, (b) posting lost dog signs, and (c) contacting us for additional advice.

**9. Breach of Agreement; Liquidation Damages:** In the event that you do not comply with the terms of this agreement, or the dog is abused or neglected, one of our remedies will be to recover the dog from you upon demand. Promptly after the demand, we will come to your residence and you will surrender the dog immediately. In addition, without waiving any of our rights under this agreement, if you do not surrender the dog to us, you will owe us a payment in an amount as determined by us as just and reasonable liquidated damages to compensate us for our cost and expenses in connection with your breach of this agreement.

**10. No Liability:** We are not liable for any claims, legal actions, losses, injuries, damages, costs, expenses, or liabilities whatsoever in connection with your adoption or ownership of the dog.

**11. Entire Agreement; Modification; Binding Effect:**

This agreement is the entire agreement between you and us and superseded any prior understanding between you and us with respect to the subject matter of this agreement. No modification of this agreement will be valid unless in writing duly signed by both you and us. This agreement is binding upon your and our heirs, assigns, successors, personal representatives and executors.

**Procedure Requirements to Return/Surrender an ARAR dog:**

1. Owner will provide at least 48 hours advance notice to ARAR of return.
2. Owner will return dog with proof of up-to-date rabies vaccination.
3. Adopter will provide any/all veterinary records accrued during adoption.
4. Adopter will complete ARAR Dog Surrender Form.

This agreement is made this (date): \_\_\_\_\_ between Angel Ridge Animal Rescue and the adopters or undersigned below:

\_\_\_\_\_  
ARAR Print Name

\_\_\_\_\_  
Adopter Print Name

\_\_\_\_\_  
ARAR Sign Name

\_\_\_\_\_  
Adopter Sign Name



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\_\_\_\_\_  
Adopter Print Name

\_\_\_\_\_  
Adopter Sign Name

Complete Address: \_\_\_\_\_ Phone: \_\_\_\_\_