

414-299-9038

PO Box 372

Woodstock, IL 60098



The Labrador Connection(TLC)

www.thelabconnection.org

APPLICATION TO ADOPT

info@thelabconnection.org

Thank you for taking the time to fill out this application. Please answer all the questions in this application as best as you can. If a question does not apply to you, please write N/A in the response area. If you need additional space for comments or explanations, feel free to attach a separate page. Once we receive your application, a TLC representative will contact you as soon as possible to schedule a home visit as part of our application process. *A home visit is required before proceeding and all members of your family who reside in the home are required to be present during the home visit.*

For those interested in ADOPTING: If your application to adopt a rescue dog is approved:

- You will be notified if you have been approved.
- After your approval notification, you will be placed on our waiting list.
- When a Lab is found that is best suited to your lifestyle, you will be notified. This can take from a few weeks to several months. If you see a dog on our website you are interested in, please contact us via email.
- If you get a Lab from another source, or change your mind about adopting from us for any reason, **please notify us** so we can remove your name from our list.
- If your application is denied, you will be notified by TLC.

Application Information

Name _____ Home Phone _____
 Spouse _____ Other Phone _____
 Address _____ Email _____
 City _____ St _____ Zip _____

How Did You Hear About TLC?

TLC Website Petfinder Other Website Friend/Family Member Event Publication

Have you applied to adopt from any other rescue organization or shelter? Yes No
 Please name them and date you applied

Have you ever had to relinquish a pet to a shelter, rescue or given it away? Yes No
 If yes, please tell us about the circumstances.

If you currently have a Lab/dog why do you want to adopt another Lab/dog?

Is there a particular TLC lab(s) that you are interested in adopting? _____

Work Situation

Your Work Situation: Full Time Part Time Work at Home Retired/Stay at Home
 Average hours you are gone during the day: Under 2 2-5 5-10 Over 10 hours
 Spouse's Work Situation: Full Time Part Time Work at Home Retired/Stay at Home
 Average hours spouse is gone during the day: Under 2 2-5 5-10 Over 10 hours

Home Situation

Do You: Own Rent
 Type: House Condo Townhouse Apartment
 How long have you lived there: Years _____ Months _____
 If you rent, do you have permission from your landlord to keep a dog in your home? Yes No
 You must provide a copy of written permission from your landlord at the time of your home visit.
 Landlord Name _____ Phone _____
 May we contact your landlord for further information or clarification? Yes No

Your Yard

Is your yard fenced in? Front Yes No Type: _____ Height: _____
 Back Yes No Type: _____ Height: _____
 Does fencing enclose the yard completely? Yes No
 Do you lock your gates? Yes No

Family Information

Any children who live in this house: Yes No How many: _____ Ages: _____
 Do any family members have allergies to animals? Yes No

Current Pets (Use an addition sheet of paper for additional pets.)

Pet	#1	#2	#3	#4
Type (if dog list breed)				
Gender				
Age				
Altered				
Name				

If multiples such as birds, reptiles, rodents, please list as a group. For more than 4 pets, please submit on an additional sheet of paper.

What type of food do you or will you feed your dog? _____ Feedings per day: _____

What type of personality and activity level are you comfortable with in a lab?

If your circumstances change (divorce, death, job changes, moving) what would you do with your pet(s)?

If you have had any pets before and they are no longer with you, explain why, if the circumstances are anything other than a natural death.

The Lab For You

Have you owned a lab before? Yes No

If this/these dog(s) are no longer with you, why?

What gender Lab do you prefer? Male Female No Preference If a preference, why?

What age group do you prefer? 0-6 months 6months to 1 year 1 year – 5 years

5 years to 10 years 10 years or older

Would you consider adopting Lab mix More than one lab A special needs Lab

The following is a list of special needs, please indicate which ones you would be willing to adopt.

- Allergies Behavior Issues Amputee Diabetic Severe Arthritis
 - Heartworm Positive Seizures/Epilepsy Blind Deaf Severe Hip Dysplasia
 - Special Diet Heart Defects Thyroid Puppy Factory/Shy-Timid Separation Anxiety Other
-

Lab Care

Who will be responsible for your Lab? Myself Spouse Other: _____

Where will your Lab be kept during the day when you are not home?

Loose in house Garage Outdoors Basement Crated/Where: _____ Other: _____

Where will your Lab be kept during the day when you are home?

Loose in house Garage Outdoors Basement Crated/Where: _____ Other: _____

Where will your Lab sleep at night?

Loose in house Garage Outdoors Basement Crated/Where _____ Other: _____

When you travel (work/vacation/other) what will you do with your Lab?

Kennel Friend Trainer Groomer Vet Other _____

How do you plan on obedience training your Lab?

How do you plan on exercising and training your Lab?

Some Labs come with minimal training and may require additional patience. Are you willing to do this?

Yes No Are you agreeable to crate training? Yes No

If your Lab is not housetrained, what housetraining methods will you use?

Are you willing to keep your Lab on heartworm preventative? Yes No

If no please explain why: _____

Are you willing to make sure your Lab has an annual physical and vaccinations? Yes No

If no please explain why: _____

What do you think it will cost on a yearly basis to take care of your lab? This includes food, treats, toys, regular check ups/vaccinations, but not any unforeseen medical expenses. _____

Veterinarian References

TLC has my permission to contact my vet to release confidential information about my pets and their care.

Yes No Please connect your vet's office and give them verbal and/or written permission for them to discuss your pets with us. If no, please explain why:

Veterinarian's Name/Clinic: _____

Address: _____ City: _____ St: _____

Phone (area code) _____

Are all current pets you own up to date on vaccinations? Yes No If no, please explain why:

Personal References

Please list three (3) personal references. Only one may be a relative and all should be familiar with your care/personal relationship with your pets.

Name _____ Home Phone _____

Address _____ Years Known _____

City _____ St _____ Zip _____

Relationship _____

Name _____ Home Phone _____

Address _____ Years Known _____

City _____ St _____ Zip _____

Relationship _____

Name _____ Home Phone _____

Address _____ Years Known _____

City _____ St _____ Zip _____

Relationship _____

Would you like to become more involved in TLC? Yes No

If yes, a TLC representative will contact you in the near future, or discuss volunteering during your adoption.

For the purpose of this document, The Labrador Connections will be referred to as TLC which means The Labrador Connection, its officers, Board of Directors, and volunteers. We reserve the right to refuse or deny any application. By signing and dating below, you attest that all information contained in this application is complete and truthful. Any misrepresentation will constitute grounds for automatic rejections.

Thank you for taking time to complete this application. Although we make every effort to contact applications quickly, please be patient as we are an *all-volunteer* organization. If you have not heard from one of our volunteers within three weeks of sending in your application, please contact us either by phone 414-299-9038 or email:

info@thelabconnection.org.

Signature _____ Date _____

Signature _____ Date _____