

GREYHOUND PETS OF AMERICA/SALT LAKE

P.O Box 520051

Salt Lake City, Utah 84152

For questions or to apply over the phone, call us at: (801) 712-7800 OR (801) 440-7801

GREYHOUND ADOPTION APPLICATION

Contact Information

Name of applicant: _____

Age of applicant: _____

Phone number(s): _____

Email Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

About you

Will you be the primary owner of the greyhound? _____

Why do you want to adopt a greyhound?

What type of research have you done about greyhounds?

How long have you been considering this decision? _____

How did you hear about GPA Salt Lake? _____

Approximately when would you be ready to bring your new greyhound home? _____

Please describe how many hours per day and days per week your greyhound will normally be left alone. _____

What is the total number of people living in your home? _____

Do all members of your household agree to this decision? _____

Please list what you would consider to be reasonable causes to give up your dog: (ex: biting, housetraining issues, moving, having a baby, etc.)

Are there any children under age 15 in your household? _____

How many? _____ Their ages: _____

Have you had any experience with dog training? Please describe.

Are you aware that the cost for basic care will be at least \$500.00 per year? ___Yes ___No

Are you committed to and prepared to assume responsibility for your greyhound for the rest of its life? _____

Do you expect any major changes in your life in the foreseeable future? (Move, job change, family situation, etc.) Please describe. _____

How often do you travel? _____

What dog arrangements will be made when you travel? _____

In which type of home do you live?

___House ___Condo ___Apartment _____ (Other)

If apartment, condo, or homeowner's association, do you have permission to keep a greyhound?

___Yes ___No

Landlord's name: _____ Phone #: _____

Name of complex/community: _____

Do you have a fully fenced yard? (Not required) ___Yes ___No

Are you aware of the importance of keeping your greyhound on a leash or in a completely secure area? ___Yes ___No

Describe how often, where, and in what ways you plan to exercise your greyhound.

Do you already have a vet or know of a vet whom you will be using?

___Yes ___No

If not, GPA Salt Lake can provide you with recommendations.

If yes, please provide vet's info below:

Name of Veterinarian: _____

Name of Clinic: _____

Phone #: _____ City: _____

Completing this section will help us to match you up with a greyhound that best fits your needs

Check the characteristics that are most important to you:

___Playful	___Lap Dog	___Laid Back	___Outgoing	___Likes kids
___Quiet	___Reserved	___Independent	___Active	___Affectionate
___Cat friendly	___Likes other dogs			

Other important characteristics/personality traits:

What traits would you consider to be undesirable?

Are you interested in participating in any specialized field with your greyhound? (Therapy, obedience, agility, etc.) Describe: _____

What activity level would you prefer your greyhound to have?

___Low ___Medium ___High ___Any

Do you have a preference as to a male or female greyhound?

Male Female No Preference

If so, why? _____

Do you have a preference as to color? _____

Do you have a preference as to age? _____

Would you consider a greyhound younger than 2? Yes No

Would you consider a greyhound older than 5? Yes No

**Note: It may not be possible to accommodate all requests.

List any pets you currently have in your household:

Kind of pet	Spayed/Neutered?	Age?	Personality type
			<input type="checkbox"/> Shy <input type="checkbox"/> Aggressive <input type="checkbox"/> Friendly <input type="checkbox"/> Dominant <input type="checkbox"/> Submissive
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			<input type="checkbox"/> Shy <input type="checkbox"/> Aggressive <input type="checkbox"/> Friendly <input type="checkbox"/> Dominant <input type="checkbox"/> Submissive

List any previous pets you have owned:

Kind of pet (Dog, cat, etc.)	Spayed/Neutered?	How long did you have this pet?	What happened to this pet?

**If your application is approved, your greyhound MUST be kept indoors and never left outside for extended periods of time, day or night. Your greyhound can never be tied out. Please initial here to indicate that you agree and will comply: _____

**If your application is approved, you will be considered the primary adopter responsible for the greyhound's care. If for any reason you are unable to keep your greyhound, he or she must be returned to GPA Salt Lake. You agree to never place the greyhound in a shelter or with anyone else without prior written permission from an officer of GPA Salt Lake. Initial here if you agree to these terms: _____

**GPA Salt Lake may request a home visit prior to placement. A home visit can help us to better determine the right greyhound for you, and we may have ideas or suggestions to help you prepare your home for a greyhound. On your request, we will be happy to bring along one of our own pet greyhounds so that you can get a feel for their size and presence in your home. The GPA Salt Lake representative will not try to assess your housekeeping skills or your taste in home décor. Our primary concern is the safety of the hounds we place.

Will you allow us to schedule a home visit with you? ___Yes ___No

If so, would you like our representative to bring a greyhound along? ___Yes ___No

Please list three personal references (not family members) that we may contact:

NAME:	RELATIONSHIP:	PHONE #:

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT. If my application is approved, I agree to keep the greyhound exclusively as a pet. I will accept full responsibility for his or her care and will not hold the previous owner or GPA Salt Lake and its representatives responsible for any future liability concerning this greyhound. All greyhounds placed by GPA Salt Lake have been spayed or neutered prior to adoption. A minimum donation fee of \$195.00 will be due at the time of adoption to partially cover the greyhound's previous vet work and transportation costs.

Name (print): _____

Signature: _____ Date: _____