

stroccofoundation.com

Adoption/Foster Agreement & Application

Animal Name/ID Number:	
Contact Information	
Name:	
Street Address:	
City, State & ZIP:	
Home Phone:	Cell Phone:
Best time(s) to call:	
Email Address:	
Employment Information	
Employer:	
Title/Position:	
Length of time at current employer:	
Work Phone:	
Family & Housing	
Choose one: Own	If rent, are pets allowed? Yes No
	Landlord Phone:
Landlord name:	By providing this information you are allowing SRF to contact your landlord. Please inform them of this call so they will speak with us.
Length of time at current address:	Type: House Other:
Please describe your household: Active	☐ Noisy ☐ Quiet ☐ Other



stroccofoundation.com

Adoption/Foster Agreement & Application

Number of adults in the household:						
Number of children in the household:			ousehold:	Ages:		
Does anyone in the family have a known allergy to animals? If yes, please explain.						
Other Pets						
Do yo	u have oth	er pets in th	he household? [Yes No		
Dog	Gender:	Male	Age:	Spayed/Neutered: Yes No		
Dog	Gender:	Male	Age:	Spayed/Neutered: Yes No		
Dog	Gender:	Male	Age:	Spayed/Neutered: Yes No		
Dog	Gender:	Male	Age:	Spayed/Neutered: Yes No		
Dog	Gender:	Female	Age:	Spayed/Neutered: Yes No		
Are the household pets current on vaccines? Yes No If no, please explain:						
Have you ever surrendered a pet? If yes, please explain: Yes No						
Have you ever had a pet euthanized? If yes, please explain: Yes No						
Have you ever lost a pet to an accident? If yes, please explain: Yes No						
Please describe the reason(s) for disciplining your pets and the methods used:						
Veterinarian						
Do you have a regular Veterinarian? Yes No If no, please indicate below which veterinarian you plan to use						
Veterinarian's Name:						
Clinic Name:						



stroccofoundation.com

Adoption/Foster Agreement & Application

Veterinarian / Clinic Address:					
Veterinarian / Clinic Phone: By providing this information you are allowing SRF to contact your veterinarian. Please call your vet and authorize the release of information to SRF					
Do you agree to provide regular vet care by a licensed Veterinarian? (adoption only) Yes No					
About the dog you wish to Adopt or Foster					
Do you have time to provide adequate love a	nd attention to adopt or foster?				
Desired breed(s):					
Breed(s) you will not adopt or foster:					
Desired Age:	Desired Size:				
Desired Gender: Male					
Willing to adopt or foster: Outgoing/energetic Needs regular medication Needs training Young Other	eds regular grooming ior				
Where will the animal spend the day? (descr	ibe):				
Where will the animal spend the night? (desc	cribe):				
Number of hours spent alone each day:					
Do you agree to keep the animal indoors?	Yes No				
Do you have a fenced yard? \(\subseteq Yes \) No					
Do you agree to contact SRF if you can no lor	nger keep this animal? Yes No				
SRF requires a home check prior to adopting member of SRF to visit your home by appoin	<u> </u>				



stroccofoundation.com

Adoption/Foster Agreement & Application

Personal References

Please list someone who is familiar with both you and your pets.

Name:			
Address:			
Phone:			
Relationship (relative, neighbor, friend, etc.):			
Name:			
Address:			
Phone:			
Relationship (relative, neighbor, friend, etc.):			
Name:			
Address:			
Phone:			
Relationship (relative, neighbor, friend, etc.):			



stroccofoundation.com

Adoption/Foster Agreement & Application

Adoption Agreement

- I agree that I am adopting this animal solely as a pet for myself and/or my immediate family. I agree that I will not sell, give away or otherwise dispose of said animal to any person(s) or other entity for any reason without the prior approval of SRF. If at a later date I am unable or unwilling to keep this animal, I agree to contact SRF and give SRF the opportunity to take back the pet.
- I also agree to care for this animal in a humane and responsible manner and to provide it with clean and appropriate shelter, food, water, exercise, companionship and veterinary care.
- I understand that I can return the pet to SRF within 15 days of the date of this Agreement and SRF will refund the entire adoption fee paid. I also understand and agree that the adoption fee I paid to SRF is reasonable and is not refundable after 15 days from the date of this adoption agreement even if I return the animal to SRF.
- I understand that SRF takes every precaution to assure the health of its adoptable animals but can make NO GUARANTEE of any kind regarding the health and/or temperament of the animal I have adopted.
- I understand that I, as the adopter, am financially responsible for the animal upon signing this document. I understand that SRF recommends that I have a veterinarian examine this animal within 15 days of adoption. I give my permission for an agent of SRF to visit the premises where the adopted animal is living, given reasonable notice.
- I further give permission for an SRF agent to remove said animal from my premises if SRF determines that the animal is not receiving appropriate care or if I have violated this agreement. Such entry onto my property shall not constitute trespass upon the premises occupied.
- I certify that all the statements made by me on this adoption agreement are true and correct. I agree that SRF has the right to confiscate the adopted animal in the event that any statements made by me are found to be false and/or payment for the adoption fee is returned or denied.
- The adoption fee for SRF animals is \$400.00. No exceptions will be made.



stroccofoundation.com

Adoption/Foster Agreement & Application

Foster Agreement

- lagree that lam over 21 years of age.
- I understand that I may be required to provide foster care to my foster animal for an extended and indefinite period of time.
- I agree to provide an SRF representative access to all parts of my home and property for a home inspection before my application to foster is approved. If approved, I also agree to provide an SRF representative access to my home and property to check on my foster animal, at any time that I am in possession of my foster animal.
- I understand that SRF provides NO GUARANTEE as to the health of my foster animal and that my foster animal may have medical needs, socialization problems, and may not be housebroken.
- I agree to provide my foster animal with veterinary care as authorized by SRF. I will not arrange or pay for any elective veterinary care for my foster animal without the express consent of an authorized SRF representative.
- I will take all necessary precautions to prevent my foster animal from either impregnating another animal or becoming impregnated. In the event that happens, I will notify SRF immediately.
- I understand that I may only have my foster animal temporarily.
- I agree that I am fostering this animal for SRF and that I do not have any right of ownership over my foster animal. I further agree that SRF's rights in and to my foster animal are superior to mine.
- I agree to immediately return any foster animal in my care to SRF at the request of its authorized representative at any time and for any reason.
- If SRF is forced to undertake legal action to enforce this provision of the agreement, I agree to indemnify SRF for all court costs and attorney fees connected with such an action.
- If I am planning to move at any time during the period when I am housing a foster animal, I agree to contact SRF prior to my move and provide SRF with my new contact information.



stroccofoundation.com

Adoption/Foster Agreement & Application

By submitting the Adoption/Foster application, you are agreeing that:

- 1. I have completely read the Adoption/Foster agreement and understand all questions on the application.
- 2. I understand that this animal MUST be indoors and will not be chained/penned outside.
- 3. I further understand that if for any reason I want to give up this animal, I will email St. Rocco Foundation and undergo a 14-day waiting period in which a representative from the organization will work with me to resolve any issues with the animal.
- 4. I also understand that a representative from the organization may visit the animal to ensure that it is well taken care of; if we find that the animal has been neglected or abused in any way or for any reason, we reserve the right to remove the animal from the premises. Your application submission authorizes us to do so as necessary, and automatically transfers ownership rights of said puppy back to St. Rocco Foundation at that time.
- 5. I authorize St. Rocco Foundation (SRF) to contact:
 - My veterinarian(s) to check the care provided to previously and/or current pets, and to check the spay/neuter history;
 - My landlord to ensure that I have his/her/its permission to keep pets) on the premises; and
 - My employer to confirm employment

Adopter/Foster Signature

I certify that the statements made on this application are true and accurate to the best of my knowledge. I understand that false statements by me may lead to the rejection of this application.

Signature(s):		
Date:		
www.stroccofoundation.com		
SRF Use Only:		