



# Lab Rescue of Greater Richmond

P.O. Box 1574, Midlothian, VA 23113-1574  
Phone: 804-417-7527  
E-mail: info@labrescue-richmond.org  
Website: http://labrescue-richmond.org

For Lab Rescue use only

Adoption Coordinator: \_\_\_\_\_

Approved  Declined Date: \_\_\_\_\_

Notes: \_\_\_\_\_

## APPLICATION FOR ADOPTION

### PERSONAL INFORMATION

Applicants and Co-applicants must be at least 18 years of age.  
Please print clearly or type; if we can't read your phone number and e-mail address, we can't contact you.

Applicant's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_

Co-applicant's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_

Co-applicant's relationship to applicant: Spouse/Partner  Parent/Guardian  Child  Roommate  Other: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Applicant's E-mail: \_\_\_\_\_ Co-Applicant's E-mail: \_\_\_\_\_

Applicant's Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Phone: \_\_\_\_\_

Co-applicant's Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you currently expecting a child? Yes  No  Are you considering having children within 10 years? Yes  No

Explain how you would resolve issues relating to new children and your dog. \_\_\_\_\_

Have you considered the full ramifications of taking a dog into your family for the rest of its life—through its illnesses and old age? Yes  No

Have you considered that having a dog through its lifetime might, over time, require changes to your life, including providing your dog with more frequent opportunities to eliminate, providing your dog with more padding in his/her bedding as old age sets in, or adjusting your routine to allow your dog to avoid stairs later in life? Yes  No

Please share your experience or questions pertaining to the last two questions: \_\_\_\_\_

Average number of days applicant is out of town (business/pleasure): 0  1-3  4-6  > 6  per week  month  year

Average number of days co-applicant is out of town (business/pleasure): 0  1-3  4-6  > 6  per week  month  year

### HOUSEHOLD INFORMATION

Type of dwelling: House  Townhouse  Apartment  Condo  Do you own  or rent  ?

If you rent, an executed copy of your full lease agreement **must** accompany your application.

If you rent, have you received permission from your landlord to have a dog? Yes  No

If you rent, is there a weight limit on dogs in your rental property? Yes  No  If yes, what is the limit? \_\_\_\_\_

Is your yard fenced? Yes  No  If yes, what kind of fence? (height and material) \_\_\_\_\_

List all residents of your household other than applicant and co-applicant:

Name: \_\_\_\_\_ Age: \_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_

What is the children's experience with dogs? N/A  Lived with  Frequent  Some  None  Large dog  Small dog

If you have children, how do you plan to prepare your children for the addition of a dog to their family? \_\_\_\_\_

Is anyone home during the day? Yes  No  Who? \_\_\_\_\_

How many hours per day will the dog be left without adult human supervision? \_\_\_\_\_

GENERAL QUESTIONS

Has the applicant or co-applicant applied to adopt from Lab Rescue before? Applicant: Yes  No  Co-applicant: Yes  No

What was the outcome of your application? Adopted  Approved but did not adopt  Never interviewed  Rejected

If you adopted through Lab Rescue before, what was the dog's Lab Rescue name? \_\_\_\_\_

Date of adoption: \_\_\_\_\_ Name of your adoption coordinator: \_\_\_\_\_

Who will be responsible for the dog? \_\_\_\_\_

Why do you want a dog? Companion  Guard dog  Gift  To breed  Personal protection  For child

Other: \_\_\_\_\_

Why do you want a Labrador Retriever? \_\_\_\_\_

All dogs adopted from Lab Rescue will be spayed or neutered. Do you have any reservations or questions about this? Yes  No

If yes, explain: \_\_\_\_\_

Where will the dog be kept during the day? (Please be specific.) \_\_\_\_\_

Where will the dog sleep at night? (Please be specific.) \_\_\_\_\_

Plans for crate use: No crate  Reluctant to crate  Crate if necessary  Temporarily crate  Permanently crate

How much do you think it will cost to take care of your dog each year (food, vet care, license, toys, supplies, training)? \_\_\_\_\_

How will your dog be cared for when the responsible persons are out of town? \_\_\_\_\_

If you move, what will you do with your pet? \_\_\_\_\_

PET CARE EXPERIENCE

Have you ever owned a dog before? Yes  No  Have you ever housetrained a dog before? Yes  No

Have you ever cratetrained a dog? Yes  No  Have you ever obedience trained a dog before? Yes  No

If you answered yes to any of the above, was your experience as an adult or as a child? Adult  Child

If you have trained a dog before, did you do so on your own  or with a professional trainer  ?

Please list all pets (not just dogs) that you have owned in the past five (5) years:

Species	Sex	Age (current or at death)	Spayed or Neutered?	Present Location
	M F		Y N	
	M F		Y N	
	M F		Y N	
	M F		Y N	

If you have *ever* had a pet die at an early age due to an accident, please give details: \_\_\_\_\_

Have you ever given a pet away or turned a pet over to a shelter or rescue group? (This includes animals adopted from and then returned to a shelter or rescue group.) Yes  No  If yes, please give details:

If you saw your dog doing something she or he shouldn't (peeing on the rug, getting into the trash, chewing the cable remote), how would you respond? \_\_\_\_\_

Have you read any books or magazines on dog behavior and training? Yes  No  If yes, what books or magazines have you read most recently? \_\_\_\_\_

How do you plan to exercise your Lab? \_\_\_\_\_

Do you live near a dog park? Yes  No  If so, would you use it for your dog? Yes  No

How will *all* of your Lab's outdoor activities be supervised? \_\_\_\_\_

**CHARACTERISTICS OF LABRADOR RETRIEVER YOU HOPE TO ADOPT**

Gender: Male preferred  Male required  Female preferred  Female required  No preference

Color: Black  Yellow  Chocolate  Colors marked are a requirement  preference  No preference

Age: \_\_\_\_\_ Would you consider adopting a dog over 3 years old? Yes  No  Over 5 years old? Yes  No   
 The age indicated is a requirement  preference

Energy Level:  High (dog will need plenty of aerobic exercise daily such as jogging, swimming, dog-dog play, or retrieving)  
 Moderate (dog will need at least two walks daily plus some play indoors or in a fenced yard)  
 Couch potato (dog will be happy with a couple of leisurely strolls or visits to a fenced yard daily)

The energy level indicated is a requirement  preference

Please tell us if there are any other qualities that you are looking for in your Lab: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Please provide the names and phone numbers of two references. (Neighbors, vets, Lab Rescue volunteers, etc.)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

How did you hear about Lab Rescue of Greater Richmond? \_\_\_\_\_

\_\_\_\_\_

Note: You may use the bottom of this page or an additional page to tell us other information that you think is important for us to have in order for us to evaluate your application to adopt a Lab.

**I acknowledge that all the information on this form is true and correct. I understand that any misrepresentation of fact may result in the removal of the adopted dog from my home by Lab Rescue.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant Signature

\_\_\_\_\_  
Date

Thank you for your interest in adopting a Lab through Lab Rescue. Please mail the application to the address on the first page of this form. If you prefer, you may scan the pages into JPG files (do not resize them) and submit the files as e-mail attachments. Our e-mail address is info@labrescue-richmond.org. An Adoption Coordinator will contact you for your interview. If you have not heard from us by then, please call the Lab Line or e-mail us to see if we have received your application and assigned it to an adoption coordinator.