

Westie Club of the South, Inc.
Atlanta Westie Rescue Committee (AWRC)
Application for Adoption

Primary Caregiver's Name (Must be at least 21 years of age):	
Co-Applicant's Name:	
Address (no p.o. boxes):	
City, State Zip:	
Home Phone:	Work Phone:
Fax #:	Email Address:

Please help us by answering the following questions:

Yes	No	
		Are all children residing in the home age 7 or older? Important: Rescued Westies will not be placed in homes with children younger than 7.
		Do children younger than 7 visit regularly?
		Do you own a dog(s)? If yes, please describe breed, age and sex: _____ _____
		Are all of the dogs spayed or neutered?
		Have you owned dogs that are no longer with you? If yes, please describe what happened to them: _____ _____
		Do you own a cat(s) or other pet(s)? If yes, please describe: _____ _____
		Are your pets housed inside?
		Do your pets visit a Veterinarian at least annually?
		Are all of your pets current on their vaccinations?
		Have you ever sold or given away a pet or surrendered one to a shelter?
		Do you own your own home or condominium?
		Do you rent a condominium or apartment? Important: If renting, please attach a copy of your rental agreement authorizing pets or a notarized statement from your landlord authorizing you to keep a dog on the premises. This must be attached to the application for it to be considered.
		Do you have a fenced yard? If yes, what type of fence:

	Do you have a pool?
	Does fencing enclose the pool?
	Do you have a hot tub?
	Does fencing enclose the hot tub?
	Is anyone in your home allergic to dogs?
	Does anyone in your home have asthma?
	Are you willing to housebreak a Westie?
	Are you willing to obedience train a Westie?
	Will the Westie be alone during the day? If yes, how long?
	Will the Westie be alone in the evening? If yes, how long?
	Will the Westie be crated when alone for short absences? If no, please explain: _____ _____
	Will the Westie sleep inside at night? If so, where:
	Are you aware that Westies can live 15+ years?
	Have you considered the added expense for vaccinations, food and grooming?
	Do you understand that the Westie will be spayed or neutered?
	Do you understand that no form of registration will be given, such as AKC papers?
	Does your job require frequent out of town travel?

How will the Westie be cared for during long absences?

Veterinarian's Name:
Address:
City, State, Zip:
Telephone #:
How long have you used this Vet?

Why did you choose to adopt a Westie?

Desired Westie: (please circle one)
 Male only Female only No gender preference
 If you specified a gender preference, please explain: _____

Age preferred: (Puppies are seldom available.):

Would you be willing to adopt a Westie 8 years old or older?

Yes No Not Sure

Would you be willing to adopt a Westie with slight health problems?

Yes No Not Sure

Occasionally, a family will surrender more than one Westie. When possible, we try to place the Westies together. Would you be willing to adopt more than one Westie?

Yes No Not Sure

References: (Required. References must be unrelated to applicant.)

Name:

Relationship:

Address:

City, State, Zip:

Telephone #:

How long?

Name:

Relationship:

Address:

City, State, Zip:

Telephone #:

How long?

How did you hear about Westie Rescue?

I certify that I have read the above information carefully and have filled out the application honestly. I understand omission of any information and/or failure to answer all questions and sign the application could result in this application being denied.

I understand that prior to being approved for adoption all of the above information will be verified, and a representative of the AWRC will visit my home for this purpose. By signing this application, I give my permission for this verification and home visit. I further understand that if an omission or untruth is discovered, the application for adoption will be denied.

I understand that if an omission or untruth is discovered after an adoption of a Westie has taken place, the AWRC reserves the right to annul the adoption and reclaim the Westie. If this occurs, I agree to relinquish said Westie immediately and without negative incident.

I further agree that if, at any time, it is the opinion of the AWRC or an agent that it is to the benefit of the Westie to be removed from my care, I will relinquish said Westie immediately and without negative incident.

Should any such situation lead to legal process, I agree that I am solely responsible for all costs, including attorney fees and court costs.

I understand and agree to make a donation as assessed by the Westie Club of the South, Inc. personnel (typically \$275) which is applied to the expenses incurred in the care of Rescued Westies by the AWRC. I acknowledge that the donation is not for the sale of the Westie, and that if the Westie is returned for any reason whatsoever, no portion of the donation will be refunded.

Date:
Primary Caregiver Name (please print):
Signature:
Co-Applicant Name (please print):
Signature:

Please send the signed and completed application to:

**Westie Club of the South, Inc.,
P.O. Box 669631,
Marietta, GA 30066
Attn: Kim Gage**

Optional donation to Westie Rescue (AWRC): _____

This optional donation would be used for the care of all ARC rescued westies and is separate from the adoption donation described above. Please make your check payable to the Westie Club of the South, Inc.

Thank you for your support.