



Westminster Adoption  
Group & Services  
we keep tails wagging

6621 Westminster Blvd.  
Westminster, CA 92683  
Telephone: 714.887.6156  
Facsimile: 714.903.6013  
E-mail: adopt@4wags.org

## Dog Adoption Application

Thank you for your interest in adopting a dog rescued by WAGS. WAGS wants to make certain that every animal adopted goes to a loving home and that it will be well cared for. Because of this, our application asks a number of detailed questions which are necessary for our screening process.

---

Name of the dog(s) you are interested in: \_\_\_\_\_

Your full name: \_\_\_\_\_

Your Age: \_\_\_\_\_ NOTE: You must be at least 18 to adopt from WAGS. Proof of age will be req.

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

City, State, Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### ABOUT YOUR HOME

Please complete this section for the household in which your new dog will reside.

Type of residence: House \_\_\_\_\_ Condo \_\_\_\_\_ Apartment \_\_\_\_\_ Mobile Home \_\_\_\_\_

Do you: Own \_\_\_\_\_ Rent \_\_\_\_\_ Live w/parents \_\_\_\_\_ Other \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Any plans to move in the next few years? \_\_\_\_\_

What would you do if you moved into a place where dogs were not permitted? \_\_\_\_\_



**Westminster Adoption  
Group & Services**  
we keep tails wagging

6621 Westminster Blvd.  
Westminster, CA 92683  
Telephone: 714.887.6156  
Facsimile: 714.903.6013  
E-mail: adopt@4wags.org

## ABOUT YOUR FAMILY

How many adults live in this household? \_\_\_\_\_ Children/Ages? \_\_\_\_\_

Are all members of the household in agreement about adopting a dog? \_\_\_\_\_

Is anyone in your household nervous or unsure around dogs? \_\_\_\_\_

For whom would you be adopting this dog? \_\_\_\_\_

Who is the primary caregiver for this dog/financially responsible? \_\_\_\_\_

Do any members of your household have asthma or allergies to dogs? \_\_\_\_\_

Describe the household activity/noise level: \_\_\_\_\_

How often do you travel? \_\_\_\_\_ Who will care for the dog? \_\_\_\_\_

How many hours a day will the dog be home alone? \_\_\_\_\_

## ABOUT YOUR CURRENT PETS

Name \_\_\_\_\_ Breed \_\_\_\_\_ Age/Sex \_\_\_\_\_

If you have a cat, does it get along with dogs? \_\_\_\_\_ Is it declawed? \_\_\_\_\_

If you have a dog, does it get along with other dogs? \_\_\_\_\_

Name & number of your current veterinarian: \_\_\_\_\_

## PET HISTORY

Have all of you family members been around dogs? \_\_\_\_\_

Have you had the experience of being a primary caregiver to a dog? \_\_\_\_\_

Have you ever given a pet away? \_\_\_\_\_ Circumstances? \_\_\_\_\_



**Westminster Adoption  
Group & Services**  
we keep tails wagging

6621 Westminster Blvd.  
Westminster, CA 92683  
Telephone: 714.887.6156  
Facsimile: 714.903.6013  
E-mail: adopt@4wags.org

## PLANS FOR YOUR NEW PET

Will the dog live: Mostly indoors\_\_\_\_\_ Outdoors only\_\_\_\_\_ Indoor/Outdoor Equally\_\_\_\_\_

Where will the dog be when nobody is home? Indoors\_\_\_\_\_ Outdoors\_\_\_\_\_ Either In or Out\_\_\_\_\_

Do you have a fenced yard?\_\_\_\_\_ What size is the yard?\_\_\_\_\_

Are you aware that some dogs require a period of weeks or even months to adjust to their new home/environment/family/other  
pets?\_\_\_\_\_ Are you willing to allow for this adjustment period?\_\_\_\_\_

What circumstances might justify giving up a dog?

\_\_\_\_Baby \_\_\_\_\_Divorce \_\_\_\_\_Dog not getting along with other pets

\_\_\_\_Moving \_\_\_\_\_Allergies \_\_\_\_\_New household member dislikes other dog

\_\_\_\_Shedding \_\_\_\_\_Bad Behavior \_\_\_\_\_House soiling/Urine marking

\_\_\_\_Want to travel \_\_\_\_\_Dog becomes ill \_\_\_\_\_Destructive

\_\_\_\_None \_\_\_\_\_Children lost interest \_\_\_\_\_Too time consuming

\_\_\_\_Other \_\_\_\_\_

If your dog exhibits behavioral or adjustment issues, would you be willing to seek the advice of a WAGS representative?\_\_\_\_\_

Would you be willing to pay for obedience or behavioral lessons?\_\_\_\_\_

**Thank you for taking the time to fill out our adoption application. It is an important tool for us to learn a little bit more about you and your preferences. By filling this out, you are giving us a better idea about you and your household so we can see if the dog or dogs that you are interested in adopting will be a good match for you and your family.**

---

Potential adopter signature

Date



Westminster Adoption  
Group & Services  
we keep tails wagging

6621 Westminster Blvd.  
Westminster, CA 92683  
Telephone: 714.887.6156  
Facsimile: 714.903.6013  
E-mail: adopt@4wags.org

## Pet Adoption Agreement

Adopters Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Email \_\_\_\_\_

Pet's Name \_\_\_\_\_ Breed \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_ Color \_\_\_\_\_

Date of Surgery \_\_\_\_\_ Date of Pickup \_\_\_\_\_

I/We, the above mentioned, understand and agree that the Westminster Adoption Group & Services makes no express or implied warranty, representation or promise to the age, health, breed, habits, disposition or safety of the animal described above. I hereby accept the animal as is, assume all risks and responsibilities associated with the ownership of the animal, including bites, and I hereby fully and completely release, indemnify and hold harmless Westminster Adoption Group & Services, its directors, officers, volunteers, servants, and employees from any claim, cause of action or liability of any sort or nature, whether known or unknown, directly or indirectly arising out of or in connection with the adoption, care or ownership, maintenance, temperament or condition of the animal. **Initial Here** \_\_\_\_\_

**Home Care:** I will provide a humane environment, regular exercise and companionship for my pet. **Initial Here** \_\_\_\_\_

**Collar-Licensing Tags:** I will legally license this dog (or cat where needed). I will keep the dog/cat clearly identified immediately upon adoption and at all times. **Initial Here** \_\_\_\_\_

**Spay/Neuter:** Breeding of this dog/cat is strictly forbidden. If this pet is not already spayed or neutered, he/she will be prior to going home unless specified by a staff veterinarian. The only reason a spay or neuter surgery would not be performed would be due to a medical condition that would make an anesthetic procedure too risky. **Initial Here** \_\_\_\_\_

**Age Restrictions:** I am 18 years or older. **Initial Here** \_\_\_\_\_



**Westminster Adoption Group & Services**  
we keep tails wagging

6621 Westminster Blvd.  
Westminster, CA 92683  
Telephone: 714.887.6156  
Facsimile: 714.903.6013  
E-mail: adopt@4wags.org

**Veterinary Care/Conduct & Health of Dog/Cat:** After adoption, this dog's/cat's health is the adopter's full responsibility. Adopter understands that **a free exam can be used at Westminster Veterinary Group within 30 days of adopting**, but any medicines, treatments, etc., are the financial responsibility of the adopter. Adopter will arrange for immediate veterinary care in the event of illness or injury. Adopter understands that no one can predict how a dog/cat will react in a new situation. Therefore, adopter will exercise prudence and caution in introducing this dog/cat into the new situation until the dog/cat has become fully adjusted to its new environment and adopter has had an opportunity to become familiar with the dog's/cat's unique personality. Adopter assumes full responsibility for the conduct of this dog/cat, and for any damage to persons or property. The Westminster Adoption Group & Services strives to provide you with a healthy pet, however we can make no explicit or implicit guarantees in reference to the health and/or temperament of the dog/cat. The stress of changing environments can lower and animal's immunity to fight disease and the pet could harbor an infection without displaying symptoms. The dog/cat is adopted "as is" and the adopter assumes all responsibility for treatment of any and all existing conditions or any other physical, medical or temperament changes that may occur in the future. **The Westminster Adoption Group & Services cannot guarantee the health of any animal and shall not be held responsible for any medical expenses which may be incurred. I understand that I may return the animal for an exchange or adoption refund within 7 days for a previously undiagnosed health reason verified by Westminster Veterinary Group.** Westminster Adoption Group & Services does not reimburse for medical bills. Initial Here \_\_\_\_\_

I realize that I am adopting this animal with the following diagnosed condition or fault, and I realize that this animal may need further training or treatment. \_\_\_\_\_

**Other Uses:** This dog/cat will not be used for rituals, racing, fighting, medical or experimentation purposes. Initial Here \_\_\_\_\_

**Transfer of Ownership** We recognize some pet matches may not be successful through no fault of the person or the pet. We will welcome you and your returned pet back. If you are able to rehome your pet; we ask that you provide us with the new families contact information so we may continue to provide support to that animal. Initial Here \_\_\_\_\_

We are here to promote a healthy relationship between you and your pet. We encourage you to call us with any questions and concerns and ask that you respond to our follow up requests by phone or email. Thank you for adopting a new family member from the Westminster Adoption Group & Services, we look forward to hearing all about how your new addition is fitting in. Please keep us posted! PS...we LOVE pictures!

---

Adopter's Signature

Today's Date

---

Staff Signature

Today's Date