



Date: ___/___/___

Adoption Questionnaire

Please note: Rescue dogs MUST be indoor animals only, must be spayed/neutered, and must be returned to DOGS XL if an adoption does not work out for any reason. If you are seeking a small or medium size dog, we would be happy to refer you to a partner rescue that specializes in smaller breeds.

Name: _____ E-mail: _____

Address: _____ Housing Type: Apartment/ Condo (# _____)
_____ Detached Home Townhouse

Primary Phone: _____ Secondary Phone: _____

Are you renting? YES NO If yes, please provide landlord name and phone: _____

Does your home have any pet restrictions (weight/breed/number of animals)? YES NO

How many people live in your home? _____ Ages of children who live in/ regularly visit your home: _____

How long would the dog be alone on any given day? _____

CHARACTERISTICS OF YOUR IDEAL DOG

What age dog? Senior(over 7 yrs) Adult (2-7 yrs) Young (6 months -2 yrs) Puppy (under 6 months)

Do you have a sex preference? Male Female Do you have a breed preference? _____

Do you have a size preference? Large (75-100 lbs) Extra Large (100-150 lbs) Giant (over 150 lbs)

What is your energy level preference?: Couch Potato Medium High Running Buddy

What are the most important characteristics in a dog? _____

What behaviors concern you the most? _____

Are you willing to work on behavioral issues with a dog trainer? YES NO

PET HISTORY

Name	Species/Breed	Age When Adopted	Length of Ownership	Where is Pet Now

Name and phone number of the vet you use for current or past pets: _____

Send Adoption Questionnaire to info@dogsxlrescue.org