

## APPLICATION FOR ADOPTION

Atlantic Newfoundland Rescue reserves the right to refuse any application.

Applicant Information:

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

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Res.: (\_\_\_\_) \_\_\_\_\_ Business: (\_\_\_\_) \_\_\_\_\_

Referred by: \_\_\_\_\_

Why do you want a Newfoundland? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you hear of Atlantic Newfoundland Rescue? \_\_\_\_\_

\_\_\_\_\_

Type of dwelling you live in: House \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Do you own \_\_\_\_\_ or rent \_\_\_\_\_ your home?

If rented, does your rental agreement permit you to keep large dogs? Yes \_\_\_\_\_ No \_\_\_\_\_

How long have you lived at your present address? \_\_\_\_\_ If less than 2 years, your previous address: \_\_\_\_\_

\_\_\_\_\_

What is the size of your lot? \_\_\_\_\_ Is it fenced? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you had dogs before? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what happened to them?

\_\_\_\_\_

Do you currently have animals? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what kind and age are they? \_\_\_\_\_

\_\_\_\_\_

Is everyone in the family in agreement about adopting a rescued Newfoundland? \_\_\_\_\_

Would everyone in your house be available to come and meet a possible adoptee? \_\_\_\_\_

How many people are in your household? \_\_\_\_\_

If you have children, what are their ages and sex? \_\_\_\_\_

Are members of your family home during the day? Yes \_\_\_\_\_ No \_\_\_\_\_

How many hours will the dog be left alone? \_\_\_\_\_

Will the dog be kept in the home \_\_\_\_\_ Yard \_\_\_\_\_ Both \_\_\_\_\_

Will the dog be tied up? Yes \_\_\_\_\_ No \_\_\_\_\_

Where will you keep the dog during the day? \_\_\_\_\_

Where will you keep the dog at night? \_\_\_\_\_

Is any member of your family allergic to dogs? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you had any experience in housebreaking a dog? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to crate train a dog if necessary? Yes \_\_\_\_\_ No \_\_\_\_\_

***References:***

Veterinarian you most often use (name and phone number):

\_\_\_\_\_

Name and phone number of a local individual (not a relative) who knows or has known your other animals:

\_\_\_\_\_

Are you willing to have a member of the Atlantic Newfoundland Rescue visit your home prior to adoption (by appointment)? Yes \_\_\_\_\_ No \_\_\_\_\_

*I have read the Atlantic Newfoundland Rescue Terms of Adoption and am willing to abide by those terms if I adopt a Newfoundland.*

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# ATLANTIC NEWFOUNDLAND RESCUE

## Terms of Adoption

### 1. Fee

The only fee involved is a \$150 donation to help cover rescue expenses. There is no fee to adopt rescue Newfoundlands eight years and older. The Rescue dog will have been neutered or spayed, given all necessary inoculations including a rabies shot, heartworm tested, stool tested for parasites, and given any other medical treatment needed before adoption.

### 2. Return Policy

If for any reason the adoption is not satisfactory for the Atlantic Newfoundland Rescue (ANR) dog or the adoptive family, ANR requires that the dog be returned to the ANR. The Rescue dog **must not** be sold or given away. Atlantic Newfoundland Rescue reserves the right to take back any Rescue dog that is neglected, improperly cared for, or allowed to run free unsupervised or left in an uncontrolled environment.

### 3. Release

The adoptive owner must sign a legal release to protect him/herself, Atlantic Newfoundland Rescue and the Rescue dog.

### 4. License

The Rescue dog must be licensed in accordance with the existing laws in the adoptive owner's town and the rabies shot must be kept current.

### 5. Care

The adoptive family agrees to provide proper shelter, food, medical care, and agrees that their Rescue Dog will not run free without supervision. Failure to comply with these requirements will require that the Rescue Dog be surrendered to ANR.

We recommend that you follow a regular inoculation program established by your veterinarian. Your dog will need yearly boosters for Distemper and Parvo as well as a Rabies booster.

*I have read the Terms of Adoption, understand and agree to abide by them if I adopt a Newfoundland from the Atlantic Newfoundland Rescue.*

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Name (Please Print)

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Signature

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Date

(If you are under 18 years of age, your parent or guardian must sign.)

# ATLANTIC NEWFOUNDLAND RESCUE

## Release and Indemnity Agreement

IN CONSIDERATION of the payment of the sum of \_\_\_\_\_ (\$ \_\_\_\_\_) dollars, the receipt of which is hereby acknowledged, the undersigned Adopter(s) do hereby forever release, discharge and covenant to hold harmless the Atlantic Newfoundland Rescue (ANR) and any other person, firm or corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors and assigns, from any and all claims, damages, costs, expenses, loss of services, actions and causes of action belonging to the said Adopter(s) arising out of any act or occurrence for the present time, and particularly on account of the adoption:

\_\_\_\_\_ ANR # \_\_\_\_\_

To procure the payment of the said sum, the Adopter(s) hereby declare(s) that no representations about the nature of said dog, nor any representation regarding the nature and extent of legal liability or financial responsibility have induced the Adopter(s) to make the Release and Indemnity Agreement; that in determining the amount of the said sum, here has been taken consideration of age, health, veterinarian services and care of the said dog, up to the present time.

THE UNDERSIGNED hereby further agrees to abide by the "Terms of Adoption" listed below:

- i. Neutering. The said dog must be neutered or spayed by \_\_\_\_\_. Said dog may not be used for breeding purposes.
- ii. Return. If for any reason the adoption is not satisfactory to the adopting party, or if the Adopter(s) fail(s) to comply with all the terms and conditions of the Agreement, or if any misrepresentations have been made by the Adopter(s) during the entire lifespan of the adopted dog, the dog must be returned to the Atlantic Newfoundland Rescue.
- iii. If the return takes place prior to 30 days from the adoption and the dog is in as good or better mental and physical condition as on the date of adoption, there will be a conditional, pro-rata refund of the adoption. There will be no refunds after 30 days.
- iv. Transfer of Ownership. The "Rescue" dog may not be transferred to any other person, firm, corporation, or organization for any reason whatsoever.
- v. Said dog must not be maintained as a yard dog. The primary and ONLY function a "Rescue" dog is that of a house pet.
- vi. Health Program. The dog will be placed on an inoculation preventative program established by the Adopter(s) veterinarian, in order to guarantee the health of the dog.
- vii. Reservation of Rights. The Atlantic Newfoundland Rescue reserves the right to follow through on this adoption in order to protect the welfare of the "Rescue" dog. If the terms and conditions of this agreement or not upheld by the Adopter(s) and/or if any misrepresentations have been made to the Atlantic Newfoundland Rescue by the said Adopter(s), the Atlantic Newfoundland Rescue reserves the right to terminate this agreement, and the adopting party must return the "Rescue" dog to the Atlantic Newfoundland Rescue. These rights are enforceable by law and in equity.

viii. Legal Fees and Costs. Should it become necessary for the Atlantic Newfoundland Rescue to take legal action to recover an adopted dog or otherwise enforce the provisions of the Agreement, the undersigned Adopter(s) agree(s) to pay all court costs and reasonable legal fees.

THE UNDERSIGNED understand that the parties hereby released admit no liability of any sort by reason of the said adoption and that said payment is made to terminate further controversy respecting any and all claims for damages that said Adopter(s) have heretofore asserted or might personally or through representative hereafter assert because of said adoption.

SIGNED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

In the presence of:

\_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Agent for the Atlantic Newfoundland Rescue

Signature: \_\_\_\_\_

Adopter(s) Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

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

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code \_\_\_\_\_

Signature of Adopter(s): \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

ANR Case # \_\_\_\_\_

DOG'S REGISTERED NAME: \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

AGE: \_\_\_\_\_

CKC REGISTRATION # \_\_\_\_\_

CASE OFFICER: \_\_\_\_\_

ADDITIONAL COMMENTS:

ADDITIONAL RECOMMENDATIONS: