

**Thank you for your interest in Hand Me Down Dobs, Inc.
Please complete the Adoption Application and mail to:
Hand Me Down Dobs, Inc.
PO BOX 12325
Columbus, OH 43212-0325
Or fax to: 1-844-325-0446
Or scan and email to: adoptions@hmdd.org**

We ask that all prospective adopters fill out an adoption application. This will tell us a little bit about you and help us get a general idea of what you are looking for in a dog. We will contact your veterinarian for a reference and then will contact you to set-up a home visit. This mini-interview allows us to get to know you better, to see the environment in which the adopted dog will live, and helps us to better ascertain which dog will be the best match for your household and lifestyle. Dobermans are “velcro” dogs by nature and determining which companion would best fit you and your lifestyle will help insure a successful relationship. If you should decide to adopt a rescue Doberman, both you and the dog will benefit. The dog will become a part of a loving home and you will be getting an unbelievably devoted companion. If we currently do not have a Doberman in the program that matches your needs, we will retain your application until one does find its way into our program. We encourage you to contact our Dobe Hotline (614-470-2851), e-mail at adoptions@hmdd.org, or check our website to inquire of any new dogs or if you have any questions or changes to make to your application.

Name: _____

Spouse's name: _____

Other adults in household: _____

Address: _____

City, State, Zip Code: _____

Home phone: _____

Work phone: _____

Cell phone: _____

Best time/number to call: _____

E-mail address: _____

Occupation: _____

Spouse's occupation: _____

Please list ages and gender of children living in or regularly visit the home. If visiting please note how often.

Age: Gender: Live/Visit: How often:

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Does anyone in your household have allergies to animals?

Do you own or rent your home? Own _____ Rent _____ **If you rent, please check with your landlord PRIOR to submitting an application to verify that you are permitted to have a Doberman.**

What type of home? Single family ____ Apartment ____ Townhouse/Condo ____ Mobile Home _____

If you rent, please provide us with your Landlord/leasing company's phone number:

List all names, types, ages, genders and indicate if spayed or neutered for all animals in household:

Name: Type: Breed: Age: Gender: Spay/Neutered:

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If there is no dog currently in the home than please describe your last dog and what happened to it.

A representative from the rescue program will be contacting your veterinarian for a reference. **Please call your veterinarian prior to give permission for us to inquire about your past or current pet's medical history.**

Veterinarian:

Phone:

Address:

City, State, Zip:

How did you learn about HMDD?

Have you applied to another rescue? Results?

Have you ever owned a Doberman before?

If yes, tell us a little about the one you had or have.

If no, why did you choose this breed?

How many hours will the dog be left alone on a typical day?

Where will the dog stay when you are not at home (work, shopping, etc)?

Do you have a gender preference: **YES / NO** Male _____ Female _____

Do you have a color preference: **YES / NO** Black _____ Red _____ Fawn _____ Blue _____ Albino _____

Desired age range:

Would you be willing to consider a suitable dog of a different:

Gender? **YES / NO** Color? **YES / NO** Age? **YES / NO**

Would you be willing to adopt a dog with uncropped ears? **YES / NO**

Would you be willing to adopt a dog with an undocked tail? **YES / NO**

List your plans/goals for this dog (Pet/Companion, Protection, Obedience Work, etc.):

Do you have a fenced yard or area for the dog? **YES / NO**

If yes, please list the type, height and square footage of fenced area for dog.

If no, what arrangements will you have for the dog's exercise and elimination requirements?

Where will the dog spend the day?

Where will the dog spend the night?

Are you willing to give a dog a reasonable amount of time to adjust to your home and family as well as understand that there may be potty errors, etc., during this transition time? **YES / NO**

Do you understand that Dobermans are highly intelligent, working/companion dog that requires attention, training, exercise and plenty of human contact and as such are not meant to be outside dogs or secluded from their family?
YES / NO

Do you understand and accept that as a requirement of the terms of adoption that you and the dog will be required to attend obedience training classes within two (2) months of adoption? **YES / NO**

Are you willing to let a representative of the rescue program visit your home by appointment? **YES/ NO**

Hand Me Down Dobes, Inc., reserves the right to follow up on the adoption in order to protect the welfare of the placed dog. If the terms and conditions of this agreement are not upheld by the adopter or if any misrepresentations have been made, Hand Me Down Dobes, Inc. reserves the right to terminate this agreement and the adopter must return the dog to the rescue program. The adopter also agrees to provide periodic updates on the dog and to provide yearly vaccination/veterinarian records upon request.

RELEASE OF LIABILITY

I understand that neither Hand Me Down Dobes, Inc., nor any of its representatives, is responsible for the accuracy of the information received about the temperament, habits, or physical condition of the dog available for adoption. I understand that it is my responsibility to see and evaluate the dog for myself before agreeing to adopt it. I have read this application and am in full agreement with the terms of adoption application. In redeeming a dog from the program, I accept full and complete responsibility for that actions of the dog in the event of an injury or death to myself or others and to indemnify and hold harmless Hand Me Down Dobes, Inc., including its representatives, agents, and board members for any such personal injury, death, or damage caused by such dog now or in the future.

Applicant Signature:

Date:
