## Victorian Bull Terrier Rescue Inc.

## **Adoption Application Form**

These questions are aimed at making sure you understand the extra responsibilities that come with caring for a bull terrier and to assist us in placing the right bull terrier with you.

Please ensure you include all relevant information in this application. Only that information which is provided in this application will be considered in assessing suitability of your chosen bull terrier(s).

Name of dog you are enquiring about?							
Perso	nal Informa	tion					
Full N	Name		E-mail				
Prefi x	First Name	Last Name					
Mobi	le Number	Home Number	Date Of Birth				
Area Code	Phone Number	Area Phone Code Number	/				
Addr	ess						
Street A	Address						
Street A	Address Line 2						
City		State / Province	2				
Postal /	Zip	Country					
Muni	cipality/Cour	ncil					
1. Ple	ase tell us ho	w long you owned you	r previous dog and what happened to it?				
		· ·					
2. Are probl		rcumstances where yo	u might not be willing to adopt a dog? i.e. Behaviour				
	you are not er ested in adop		cular dog, please give sex and age of dog you would be				

4. Why do you want to adopt a dog, e	eg companion for yourself /other pet / for children / watchdog?
5. Have you ever taken an animal to	a shelter or released it to another party?
	epresentative to make a home visit at a mutually agreed time? s required prior to adoption, to ensure the safety of your new
7. Do you own your home? If you are	e renting, please provide us with your landlord's written
verification that a dog is permitted:	
8. Please provide an Emergency Con	ntact
First Name Last Name	
Thist Name Last Name	
<b>Emergency Mobile Number</b>	
Area Phone	
Area Phone Code Number	
Phone Number	
Area Phone Code Number	
E-mail	
40.3100	
Address - if different to above	
Street Address	
Street Address Line 2	
City State / Pro	 ovince
Postal / Zip Country	

Code

Vet Name		Vet Phone Number
		rea Phone
	C	ode Number
Vet E-mail		
	_	
Referee 1 Full Name (Must not family)	be Phone Num	nber E-mail
First Name Last Name	Area Phor Code Num	
Referee 2 Full Name (Must not family)	be Phone Num	nber E-mail
First Name Last Name	Area Phor	
11. Number of people living at	12. Ages if u twenty five?	
11. Number of people living at premises?  13. Will your new dog have reg	twenty five?	uildren 5 years or under (own children,
11. Number of people living at premises?  13. Will your new dog have reg	twenty five?	uildren 5 years or under (own children,
Your Home  11. Number of people living at premises?  13. Will your new dog have reg grandchildren, visiting children  14. Do you currently have any people and children.	twenty five? ular contact with ch n) or elderly people?	nildren 5 years or under (own children,
11. Number of people living at premises?  13. Will your new dog have reg grandchildren, visiting children	twenty five?  ular contact with ch  n) or elderly people?  pets? Please give bre	nildren 5 years or under (own children,

17. Which areas of the house will your new Bull Terrier have access to, eg backyard and laundry/kitchen/non-carpeted/other areas? Do you have a doggie door? Are there any areas which are off limits?
18. Is your yard securely fenced? Describe type of fencing (wooden, colourbond, wire etc) and height at the lowest point. If you have a swimming pool is it separately fenced?
19. If no-one is at home, where will your new dog stay? Inside or Outside? If the dog is outside, what type of shelter will the dog have?
20. How many hours will the new dog be without human company for each day?
21. How many dogs are you allowed by your Council?
Breed Knowledge & Experience
22. How will your new Bull Terrier be introduced to your human family members? What specific steps will you take to integrate them?
23. How will your new Bull Terrier be introduced to your existing pets? What specific steps will you take to integrate them?
24. Please tell us what breeds of dogs have you previously owned and have you ever owned a bull terrier?

If I am to be granted a trial period for the adoption of a VBTRinc dog:

I agree that this bull terrier is being adopted for myself and will not be sold, adopted, or given to another party.

I agree that this dog will not be allowed off my premises unsupervised. When taking this dog out or travelling by car, I shall remain vigilant and he/she will be secured by a harness and/or collar and lead and will wear an ID tag.

I agree that this dog will be a companion animal and will live as part of my family, he/she will not be used as a guard or hunting dog.

I agree to care for this dog in a humane manner. This includes providing adequate, food, water, shelter, attention and veterinary care.

I understand and agree, that it is a Victorian Bull Terrier Rescue Inc. requirement that this dog is desexed prior to adoption.

I have read, understood and will abide by the Foster/Adoption Guidelines provided on the VICBTR website.

Lagree that if I have any training issues or difficulties with this dog, I will contact Victorian Bull Terrier Rescue Inc. for advice.

I agree to take responsibility for any damage or injury to the dog or caused by the dog during the trial period. I understand that I am not the legal owner of the dog until the completion of the trial period and the animal is registered in you name.

I agree to take responsibility to any costs incurred should the animal be impounded by council or any other authority. During the trial period, should the dog require medical attention, I will contact Victorian Bull Terrier Rescue Inc, I also understand that any veterinary costs incurred will not be refunded unless agreed by the organisation.

I agree that if this dog is re homed as an only pet, I will not attempt to bring other animals into the home.

If this dog is re homed with another pet, I agree to carefully supervise them when they are together and will not leave them alone together until I am sure that there will be no conflict.

Lagree to keep Victorian Bull Terrier Rescue Inc. updated with my current contact details.

I agree that if at any point I am unable to keep this dog, I will return him/her to Victorian Bull Terrier Rescue Inc., without requesting a fee.

I agree that there will be a minimum of a two week trial period, longer if re homing with other animals. During this time I shall take full responsibility for the bull terrier and will abide by the Victorian Bull Terrier Rescue Inc. guidelines, terms and conditions.

I understand and agree, that although every dog adopted has been tested for temperament & behaviour, I agree to take on trial/adopt the named dog at my own risk and indemnify and release Victorian Bull Terrier Rescue Inc. its director and volunteers, of any and all liability arising from damages to person(s) or property caused by the dog.

I agree that all statements on this form are true. If it is found that any statements are untrue, the adopted dog may be confiscated.

I agree that if at any time Victorian Bull Terrier Rescue Inc. feels like the dog is being mistreated or breaking these terms and conditions, they have the right to claim the dog back.

IF AT ANY STAGE YOU FEEL YOU CAN NO LONGER CARE FOR YOUR ADOPTED BULLY, PLEASE CONTACT US IMMEDIATELY.

IF YOUR BULLY IS INVOLVED IN AN ALTERCATION WITH ANOTHER ANIMAL OR HUMAN AND YOU NEED LEGAL ASSISTANCE, PLEASE CALL MICHAEL FALTERMAIER ON 9397 8091 AND VBTR ON 0409423115 DO NOT LET THE COUNCIL PUT OUR DOG TO SLEEP, ALL SITAUTIONS CAN BE RESOLVED WITHOUT THIS HAPPENING. CONTACT US FIRST!

I accept the dog with all faults, blemishes, health conditions and imperfections (If any) and herby exonerate the board of Victorian Bull Terrier Rescue Inc. from any responsibility in respect to the dog.

I have read and fully understand the Terms and Conditions of this agreement and agree that it is not arbitrary and that provisions herein, are common in pet adoption agreements. I further understand, that if I fail to comply with any of the Terms specified herein, VIC Bull Terrier Rescue has the right to reclaim the dog and to enforce this contract in a court of law.

Applicant Name			Date						
First Name	Last Name		Mont h	Day	Year				
Signature									
Victorian Bul	l Terrier Re	scue Inc.	Repres	sentati	ive				
First Name	Last Name								
Adoption Dat	ee	Transpo	rted By	y		erstate Ado m - To	option		
Name of Bull Terrier		Sex		Age	or Birth l	Date	Colour		
Distinctive M	arkings								
By submitting this	form, you are a	greeing to th	ne above	Terms &	k Condition	5.			
Microchip Nu	ımber								