



Lone Star Animal Welfare League Adoption Program

Applicant's name: _____

Address: _____

City, State and Zip: _____

Home phone: _____ Cell phone: _____

Work phone: _____

Email address: _____

How long have you lived at your current address? _____

Do you own or rent? _____

If you are a renter, please provide your landlord's contact information:

Name: _____

Address: _____

City, State and Zip: _____

Phone #: _____

Do you have your landlord's permission to have a dog? _____

If so, up to what size? _____

How did you become aware of LSAWL? _____

Are there one or more specific dogs that you are interested in? _____

Preferred activity level: _____ high; _____ medium; _____ calm; _____ any

Preferred sex: _____ male; _____ female

Ages of all adults (including yourself) and children who live at your house: _____

Do they share your interest in adopting a dog? _____

Who is the dog primarily for? _____ adult; _____ child; _____ elderly; _____ entire family

Who will care for, train and exercise the dog? _____

Does anyone in your household have allergies? _____

If yes, what are the allergies? _____

Who is your current veterinarian? _____

His/her address is: _____

City, State, Zip _____

His/her phone number: _____

What kind of food do/will you feed your dog?

Will the dog be allowed in the house? _____

How long each day will the dog be left alone (without humans)? _____

Where will the dog stay when it is left alone? _____

Are you familiar with the use of a dog crate to train the pet during your absence or at night? _____

Is your yard fenced? _____

If so, please describe the type of fence, its height and the dimensions of the fenced area: _____

If you do not have a fence, will you install one? _____

What is the approximate size of the dog's yard area? _____

Will the dog be exercised in a fenced yard? _____

Will the dog be allowed to run free without supervision? _____

Will you take the dog to an obedience training class? _____

Have you ever owned a dog? _____

Please list all current and previous pets owned. If deceased, please state age and cause of death

Have you ever owned a Labrador Retriever? _____

If you have (had) a dog, does (did) he/she receive monthly heartworm preventative? _____

What type of heartworm preventative will you use?

Are you aware that labs are active? _____

Are you aware that the routine costs of maintaining a dog average over \$500 per year? _____

Have you ever sold, given away, or surrendered a pet to a shelter? _____

If so, please specify why: _____

Please tell us why you want a dog: _____

Please tell us a little of your lifestyle, your family including any special activities in which your dog would be included. _____

If and when you move, what will you do with your dog? _____

Do you understand the state and local ordinances concerning licensing and leashing? _____

Have you, or any member of your family/household, been cited for leash law violations or cruelty to animals in the past? _____

If so, please specify: _____

I (we) attest that the information provided on this application is true and accurate to the best of my (our) knowledge. I (we) hereby permit Operation Save a Lab to contact my (our) veterinarian.

If for any reason adopter is unable to keep an adopted dog for its entire life, adopter must contact Operation Save a Lab and make arrangements to return the dog to Operation Save a Lab. Adopter agrees not to sell, give away or dispose of the dog in any other manner (except euthanasia for medical reasons at the advice of a licensed veterinarian) without prior consent in writing by Operation Save a Lab.

Print name of applicant

Print name of (co) applicant

Signature of applicant

Signature of co-applicant

**THE “LONE STAR ANIMAL WELFARE LEAGUE ADOPTION PROGRAM”
IS FUNDED BY
LONE STAR ANIMAL WELFARE LEAGUE, A 501(C)(3)
NON-PROFIT ORGANIZATION.
YOUR ADOPTION FEE
TO OUR ORGANIZATION HELPS DEFRAY THE COSTS
OF THIS PROGRAM, THE SPAY-NEUTER PROGRAM AND OTHER
PROGRAMS THAT ENRICH THE LIVES OF LESS FORTUNATE DOGS.**