

(include type of treatment please)

## Golden Paws Rescue Inc. PRE ADOPTION EXPRESSION OF INTEREST

Date of Application:

goldenpawsrescue@bigpond.com Mobile: 0499 551-401

| Name:  |   |
|--|---|
| Address:   |   |
| Home No:   | Mobile:   |
| Email Address:   |   |
| Ages of the People in this home:   |   |
| Size of Property:m²  | Single / Double Storey:                           |
| Does your home have any stairs: YES / NO   | How Many Stairs (No. please):                     |
| Address where your adopted dog would live:   |   |
|  |   |
| Description of Your Ideal Dog (Age / Sex / Etc.)   |   |
|  |   |
| Do you have any other animals at home: YES   | / NO If YES, please describe (type / breed / age) |
| Are these animals desexed:   |   |
| If you have another dog, please describe your dog  | 's demeanour with other dogs ?                    |
| The date your dog was last vaccinated:   |   |
| When was your dog last heart wormed: Brand: (include type of treatment please – brand)             | Date:   |
| Is the heartworm treatment a monthly treatment,  | or a yearly injection:                            |
| When was your dog last intestinal wormed: Bran (Intestinal worming is different from heartworming) | d: Date:  |
| When was your dog last flea treated: Brand: (include type of treatment please)                     | Date:   |
| When was your dog last tick treated: Brand:  | Date:   |

| Is your property fully fenced: YES / NO   |                                     |
|---|-------------------------------------|
| If YES, please list what type of fencing (back/front/sides) and how high: _                                 |                                     |
| Do you have a pool: YES / NO Inground / Above Ground - Is   | the Pool Fenced: YES / NO           |
| Could the adopted dog get through the fence to the pool   | res / NO                            |
| Is your adopted dog allowed to swim in your pool if they wanted:  | YES / NO                            |
| Are you employed: YES / NO <u>Full Time</u> <u>Part Time</u> <u>F</u>                                       | Retired <u>Do Not Work</u>          |
| How many hours would your adopted dog be alone during the day:  |                                     |
| How many hours would your adopted dog be alone during the night:  |                                     |
| Where would your adopted dog sleep at night:  |                                     |
| Would your adopted dog be welcome inside anytime:   |                                     |
| Where would your adopted dog primarily live: (inside/outside)   |                                     |
| Do you have a doggie door: YES / NO   |                                     |
| What type of shelter, bedding, and positive enrichment (toys, entertainm adopted dog when you are not home: | ent etc) would be provided for your |
| What type of exercise would you provide for your adopted dog and how o                                      |                                     |
| Would your adopted dog be socialised outside of your home and how ofto                                      |                                     |
| YOUR FAMILY:  |                                     |
| How many people in your home (include children ages please)   |                                     |
| Is there anyone in your home allergic to dogs:  |                                     |

| Do you have any disabled family living in your home:   |                        |  |  |  |
|--|------------------------|--|--|--|
| When you go away on business / holiday etc, what happens with your adopted dog:  |                        |  |  |  |
| Do you have plans in the next three months that may take you away from your current (ie: moving house, going on holiday, work commitments etc) | nt residence?          |  |  |  |
| Do you own your own home: YES / NO (If YES, please include copy of rates notice w  | with your Application) |  |  |  |
| ***If you live in a unit that you own, we must have a letter from your stating that you are permitted to have a dog/s ****                     | Body Corporate         |  |  |  |
| Do you rent:  YES / NO (If YES, we must have a letter of consent from you to have a dog, and state that a dog is a                             |                        |  |  |  |
| Please indicate what type of food you would feed your adopted dog:   |                        |  |  |  |
| Dry Kibble YES / NO If YES, what brand   |                        |  |  |  |
| RAW FOOD YES / NO (ie: chicken legs, necks, dog bones)   |                        |  |  |  |
| Canned Food: YES / NO If YES, what brand   |                        |  |  |  |
| BARF (Raw Food for Dogs) YES / NO  |                        |  |  |  |
| Would you feed table scraps: YES / NO  |                        |  |  |  |
| Cooked Roll from Supermarket: YES / NO Brand:  |                        |  |  |  |
| Other Types of Food:   |                        |  |  |  |
|  |                        |  |  |  |
| Can you supply a letter from your Vet indicating your regular treatment for your exist   |                        |  |  |  |
| , 14, , , , , , , , , , , , , , , , , ,  |                        |  |  |  |
| Do you consent to a Premises Inspection by Golden Paws Rescue:   | YES / NO               |  |  |  |
| Can you provide photographs of the property where your adopted dog would live:   | YES / NO               |  |  |  |
| If you have another dog, do you agree to bring your dog along to a "meet and greet"  | YES / NO               |  |  |  |
| Have you ever owned a Golden Retriever before:   | YES / NO               |  |  |  |
| Are you aware of the grooming / exercise involved with a Golden Retriever  | YES / NO               |  |  |  |
| Are you able to financially provide for the adopted dog, should it require treatment   | YES / NO               |  |  |  |

| If there is anything else you would like to add to support your Expression of Interest, please indicate below, feel free to attach photographs of your home and pets, or a Word Document with additional information:  |
|--|
|  |
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|  |
| ** Before signing and lodging this Pre Adoption Expression of Interest, please be aware this is not an Adoption  |
| Agreement. Submitting this form does not guarantee adoption of any dog that belongs to Golden Paw Rescue Inc.  |
| Golden Paws Rescue Inc. requires the above information to be able to make an informed decision regarding the   |
| best placement of a Golden Retriever in their care prior to any adoption.  |
| Please be mindful that some Golden Retrievers may not suit some home environments (ie: with small children, other animals etc). Our primary responsibility is to the dogs in our care. We will match our dogs to the most suitable family/environment. Please note that if you already have two dogs in your family, your Council would require an "Additional Dog" Permit to be obtained. |
| By signing this form, you are also stating that there is no person living in your household that is disqualified from keeping animals or has a Deprivation Order against them.   |
| Name of Applicant:   |
| Signature of Applicant:  |
| Date:  |
| PRIOR TO EMAILING THIS FORM TO US – PLEASE ENSURE THE FOLLOWING:   |

- You are applying for a specific dog that we have available for adoption
- You live in the Brisbane, Sunshine Coast or the Fraser Coast Region (these are the areas that we adopt to we do not adopt interstate, remote Qld or overseas)
- You have included your Rates Notice if you own your property (see Page 3)
- You have included letter from Real Estate if you are renting (see Page 3)
- You have saved this form as a PDF file, so we can send to our Committee

Please email this Expression of Interest Questionnaire to: goldenpawsrescue@bigpond.com - Thank you ©

WE WOULD LOVE TO KNOW HOW YOU HEARD ABOUT GOLDEN PAWS RESCUE. *Please insert a TICK in the relevant boxes* 

| Petrescue Site        | Our Website | O  |
|-----------------------|-------------|----|
| Family and/or Friends | Your Vet    | Ar |

Other

| Our Facebook Page |  |
|-------------------|--|
| Another Rescue    |  |
|                   |  |