

NEOCR-0001 (09/07/17)

## NorthEast Ohio Collie Rescue Inc. PO Box 1594 • Elyria, Ohio 44036-1594 Phone • (216) 213-6197 • www.neocr.org

## **Placement Application**

The answers you give on this application will help us to find the best possible match between you and an available Collie. Please fill out the form completely.

Name:		
Address:		
City:	State:	ZIP Code:
Preferred phone:	Alternate	phone:
Best time to call:	Occupation:	
Email address:		
Do you own or Rent If you rent your home, would the last for you to own a dog? Yes	indlord be willi No 🗌	ing to give written permission
Have you ever owned a Collie before	.5	
If not, why did you choose this bree	d?	
Sex preference (✓ Check one): Male Color preference: Sable/White □	Tri-Color 🗌	Blue Merle White
Age preference:		
Would you be willing to consider a s	suitable dog of	a different:
(✓ Check all that apply) Sex ☐ List all plans or goals for this dog (i.	· · · · · · · · · · · · · · · · · · ·	<u> </u>

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Would you be will age or physical im				special nee aybe 🗌	eds due to
Does everyone in y	your househo	old agree to a	adopt a Collie?	Yes 🗌	No 🗌
Who in the family	will have the	responsibili	ty of caring for	the dog?	
Is anyone in your	family allergi	c to pet hair	or dander? Y	es 🗌 💮 1	No 🗌
How many adults	in your hous	ehold?	How man	ny children?	
List ages and sex	of children:				
Do you own other	dogs? Yes [	No 🗌	If yes, how	many?	
Breed	Sex	Age	Breed	Sex	Age
				_	_
Are they spayed or	r neutered?				
List any other anim	mals you owr	1:			
What is the name	of your curre	ent veterinar	ian?		
Address:					
City, State, Zip:			Phone	No.:	
Do you have a fen	ced in back y	ard with a g	ate? Yes 🗌	No 🗌	
If yes, specify the	type of fence,	height, and	size of fenced	in area:	

If no, what arrangements will be made for the dog's exercise and toilet duties?				
Please describe the last dog you owned and what happened to it?				
If the dog died, please explain the circumstances:				
Where will the dog spend the day?				
Where will the dog spend the night?				
Do you understand and accept that this dog must be spayed or neutered?  Yes \( \subseteq \text{No} \subseteq \text{No} \subseteq \text{.}				
Would you be willing to allow a representative of our placement group visit your home by appointment? Yes ☐ No ☐ If no, why not?				
Comments:				

## **Terms and Conditions of Adoption**

I/We affirm that all of the above information is true and complete and further agree that:

Should an intact dog be placed with me, I/we agree to have it spayed or neutered within 30 days of adoption or by a date mutually agreed upon by myself and a representative of NorthEast Ohio Collie Rescue.

This dog will reside in my home as a pet. I/WE UNDERSTAND THAT UNDER NO CIRCUMSTANCES IS THE DOG TO BE KEPT OUTSIDE AS A YARD DOG.

I/We will provide it with adequate food, water, shelter, affection, and medical care.

I/We further agree not to sell, trade, or otherwise dispose of this dog, but to return the dog to a representative of NorthEast Ohio Collie Rescue, if at any time I/we are unable to keep this dog.

I/We understand that neither NorthEast Ohio Collie Rescue nor its representatives are responsible for the accuracy of the information received about the temperament, habits, or physical condition of the dog available for adoption. I/We understand that it is our responsibility to see and evaluate the dog myself before agreeing to adopt it.

Neither NorthEast Ohio Collie Rescue nor any of its representatives are liable or responsible for any damage, accident, or injury incurred during the initial examination of a dog, or from the placement of the dog in my household.

We reserve 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, we reserve the right to terminate this agreement and regain custody of the dog from the adopter.

I/We understand and agree to the terms and conditions of adoption.

Applicant's Signature:	Date:
Spouse's Signature:	Date:

- 1. Save your completed application.
- 2. Print & Return to:

NorthEast Ohio Collie Rescue Inc. PO Box 1594 Elyria, OH 44036-1594

Or email a filled-in version of this application to: **adoptions@neocr.org.** 

