



**Lab Rescue  
of the L.R.C.P., Inc.**

P.O. Box 1814  
Annandale, VA 22003

Lab Line: 301-299-6756  
Fax: 703-852-7077  
E-mail: info@lab-rescue.org

**FOR LAB RESCUE USE ONLY**

Adoption Coordinator: \_\_\_\_\_

Approved  Declined Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## APPLICATION FOR ADOPTION

*Submit completed application online, by fax or mail.*

**Applicant Personal Information** (NOTE: Applicant must be atleast 18 years of age)

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_ Work Phone \_\_\_\_\_

**Co-Applicant Personal Information** (NOTE: Co-applicant must be atleast 18 years of age)

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_ Work Phone \_\_\_\_\_

**Adoption**

When would you like to adopt?  ASAP  In the next month  In the next 3 months

All dogs adopted from Lab Rescue will be spayed or neutered. Do you have *any* reservations or questions about this?  Yes  No

If yes, please explain \_\_\_\_\_

Has the applicant or co-applicant applied to adopt from Lab Rescue before?  Yes  No

What was the outcome of your application?  Adopted  Approved but never adopted  Never interviewed  Rejected

If you adopted through Lab Rescue before, what was the dog's Lab Rescue name? \_\_\_\_\_

Date of previous adoption \_\_\_\_\_ Name of adoption coordinator \_\_\_\_\_

**Characteristics of the labrador retriever you hope to adopt**

Gender  No preference  Male preferred  Male required  Female preferred  Female required

Color  No preference  Yellow  Chocolate  Black The color selected is  Preferred  Required

Age  No preference  Under 1  1–2 years  3–4 years  Over 5 years Age selected is  Preferred  Required

Energy Level  No preference  High—requires plenty of exercise daily like jogging, dog–dog play or retrieving.  
 Moderate—requires atleast two walks daily, plus some play indoors or in a fenced yard.  
 Couch potato—this level of dog is happy with a couple of leisurely strolls or visits to a fenced yard daily.

Energy level selected is  Preferred  Required

**Pet Care Experience**

Have you ever owned a dog before?  Yes  No.....If yes, as an  Adult  Child  
Have you ever cratetrained a dog before?  Yes  No .....If yes, as an  Adult  Child  
Have you ever housetrained a dog before?  Yes  No.....If yes, as an  Adult  Child  
Have you ever obedience trained a dog before?  Yes  No.....If yes, as an  Adult  Child  
If you ever had a pet die due to an accident, please give details: \_\_\_\_\_

Please list ALL pets (not just dogs) that you have owned in the past 10 years.

Species	Sex	Age (current or at death)	Spayed or neutered?	Present location
_____	M F	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	M F	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	M F	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	M F	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

**Household information**

Who lives in your house? \_\_\_\_\_ Children under 10 \_\_\_\_\_ Dog(s) \_\_\_\_\_ Cat(s) Other (please specify) \_\_\_\_\_

List the residents of your household (other than applicant and co-applicant)

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

If the above named are children, what is their experience with dogs?  Frequent  Some  None  
Lived with  Large dog  Small dog

Are you currently expecting a child?  Yes  No Are you considering having children within 10 years?  Yes  No

Please explain how you resolve issues relating to new children and your dog: \_\_\_\_\_

If you have children, how do you prepare your children for the addition of a dog to their family? \_\_\_\_\_

Type of dwelling  House  Townhouse  Apartment  Condo

Do you  Own  Rent **If you rent, an executed copy of your lease agreement MUST accompany your application**

If you rent, have you received permission from your landlord to have a dog?  Yes  No

If you rent, is there a weight limit on dogs in your rental property?  Yes  No

**Dog Ownership**

Why do you want a dog?  Companion  Guard dog  Gift  Personal protection  For child  Other \_\_\_\_\_

Why do you want a Labrador Retriever? \_\_\_\_\_

Have you considered the full ramifications of taking a dog for the rest of its life—through illnesses and old age?  Yes  No

Have you considered that over time a dog may require changes to your life including (a) providing your dog with more frequent opportunities to eliminate; (b) providing your dog with more padding in his/her bedding as old age sets in; (c) providing your dog with medication for arthritis; or (d) adjusting your routine to allow your dog to avoid stairs later in life?  Yes  No

Please share your experiences or questions pertaining to the previous two questions: \_\_\_\_\_

## General Questions

Estimate the cost to take care of your dog each year (food, vet care, license, toys, supplies, training) \$ \_\_\_\_\_

Do you currently have a veterinarian?  Yes  No

Vet's Name \_\_\_\_\_ Practice Name \_\_\_\_\_ Phone \_\_\_\_\_

Plans for crate use:  No crate  Reluctant to crate  Crate if necessary  Temporarily  Permanently

Is anyone home during the day?  Yes  No If yes, who? \_\_\_\_\_

Where will the dog be kept when no one is home? (please be specific) \_\_\_\_\_

How many hours a day will the dog be left alone? \_\_\_\_\_ hours

Where will the dog sleep at night? (please be specific) \_\_\_\_\_

Average number of days you are out of town (business or pleasure)

*Applicant*  0  1-3  4-6  >6  Per week  Per month  Per year

*Co-Applicant*  0  1-3  4-6  >6  Per week  Per month  Per year

How will your dog be cared for when the responsible persons are out of town? \_\_\_\_\_

How do you plan to exercise your dog? \_\_\_\_\_

Do you live near a dog park?  Yes  No If yes, would you use it for your dog?  Yes  No

Do you or any member of your household plan to run/jog with your dog for aerobic exercise?  Yes  No

How will all of your dog's outdoor activities be supervised? \_\_\_\_\_

How many steps are there to reach your front door? \_\_\_\_\_

Is your yard fenced?  Yes  No If yes, what kind of fence? (height and material) \_\_\_\_\_

If you move, what will you do with your pet? \_\_\_\_\_

Additional questions or comments at this point? \_\_\_\_\_

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**How did you hear about Lab Rescue?**  Previous adopter  Personal recommendation from friend or family member  
 Facebook  Twitter  Newspaper (please specify) \_\_\_\_\_  Craig's List  Petfinder  Web search  
 Saw a flyer posted  Other (please specify) \_\_\_\_\_

## References

Please list two references. (Neighbors, vets, Lab Rescue volunteers, etc.)

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

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Thank you for your interest in adopting a dog from Lab Rescue. Please print out a copy of this application for your records before submitting. To submit your application online, click the "E-mail Application". You may also fax or mail your application (see fax number/ mailing address on the first page of this form.) An Adoption Coordinator will contact you for an interview within two weeks of receipt. If you have not heard from us at that time or have questions about the process, please contact us at [info@lab-rescue.org](mailto:info@lab-rescue.org).

**I represent that all information on this form is true and correct to the best of my knowledge. I understand that any misrepresentation of fact may result in the removal of the adopted dog from my home by Lab Rescue.**

**Applicant signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-applicant signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*By submitting this application online, you agree that clicking the "E-mail Application" button below operates as your signature.*

**E-mail Application**

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**[www.labrescue.org](http://www.labrescue.org) • Visit us on Facebook and Twitter @LabRescueLRCP**

*Lab Rescue participates in the Combined Federal Campaign. Our CFC code is 19714*

