

GSP Rescue

Adoption Application

Family Profile and Home Evaluation Form California German Shorthaired Pointer Rescue

Dear Prospective Owner,

Our goal is to find permanent, secure and attentive homes for our rescued dogs, and we know you want the best dog for your situation. This profile will assist us matching the dog most suited to your needs and interests.

After you complete this form, please **print it out and mail or fax it to the address or fax number below**. Someone from the adoption committee will contact you explaining the adoption process. Please call us at **760-726-4813** if you have not been contacted within seven days of your application being faxed (ten days if application was mailed). Your adoption is important to us, so please be patient. Thank you for your honest responses.

—GSP Rescue

ARE YOU INTERESTED IN ADOPTING FOSTERING BOTH

NAME		EMAIL		PHONE	
ADDRESS		CITY		STATE	ZIP
HOW DID YOU HEAR ABOUT US?					
DO YOU...(PLEASE CHECK ALL THAT APPLY) OWN RENT HOUSE APARTMENT CONDO MOBILE OTHER :					
NO. OF ADULTS IN HOME		NO. OF CHILDREN IN HOME		AGES	
SIZE OF YARD		TYPE OF FENCE		HEIGHT OF FENCE	
WILL THE DOG BE OUTSIDE INSIDE BOTH? EXPLAIN:					
WHAT OUTDOOR SHELTER WILL BE PROVIDED THIS DOG?					
ARE YOU LOOKING FOR A HUNTER SHOW DOG PET OBEDIENCE DOG OTHER:					

HAVE YOU OWNED OTHER DOGS? YES NO		HAVE YOU OWNED GSP'S? YES NO	
PLEASE PROVIDE A BRIEF DESCRIPTION OF EACH DOG AND WHAT HAPPENED TO THEM:			
WHAT IS YOUR TIME FRAME FOR ADOPTING?			
DO YOU HAVE ANY OTHER PETS? YES NO		CAT BIRD	
OTHER:			
WHICH DO YOU PREFER? MALE FEMALE		NO PREFERENCE AS RESCUER SUGGESTS	
WHAT AGE DOG DO YOU WANT?	WHY?		
HOW LONG WILL THE DOG BE LEFT ALONE DURING THE DAY?			
WHERE WILL THE DOG SLEEP?			
WHAT KIND OF EXPERIENCE WITH A DOG DO YOU HAVE? (TRAINING/OBEDIENCE/HUNTING/OTHER) PLEASE DESCRIBE:			
WOULD YOU BE INTERESTED IN ATTENDING TRAINING CLASSES? YES NO			
OTHER FACTS YOU FEEL SHOULD BE CONSIDERED BY THE COMMITTEE:		FOR FOSTER APPLICANTS: HOW LONG WOULD YOU BE WILLING TO FOSTER A DOG? 1-7 DAYS 1-4 WEEKS 1 MONTH OR LONGER WOULD YOU BE WILLING TO ATTEND TRAINING CLASSES? YES NO ADOPTION EVENTS? YES NO WOULD YOU BE WILLING TO TRANSPORT FOR RESCUE APPOINTMENTS? YES NO	

 APPLICANT'S SIGNATURE

 PHONE

 DATE

 EMAIL

After you complete this form, please *print it out, sign and date it, and mail or fax* it to the address or fax number below. (After the machine starts, please start your fax.)

GSP Rescue
PO Box 974
 mail to: **Bonsall CA 92003-0974**

fax to: **760-269-3136**