



Thank you for your interest in adopting a retired racing Greyhound. Greyhounds make wonderful companion pets and will give you many years of love and devotion. Adopting a Greyhound is a serious responsibility requiring a long-term commitment. This application has been designed to evaluate potential adopters to ensure that each person who adopts a Greyhound is not only aware of that responsibility, but also to address the suitability and permanence of each Greyhound placed in a home. We have worked in Greyhound adoption for many years and have seen many happy endings, and unfortunately we have also seen a few sad ones. We have only the best interest of the Greyhound in mind. Before signing this application, please know that Greyhounds can live 10 to 14 years, making this a serious, long-term commitment. It is very traumatic for a dog to be returned by its family once it has settled into its new home. Furthermore, note that the Greyhound is not for everyone. These dogs rely on us to place them into appropriate, loving, responsible homes. All adults in your household must agree to this adoption and sign the application. Please read this application carefully and consider the importance of your responses.

GALT recommends that families with children who are interested in adopting a greyhound read the book, *Childproofing Your Dog: Complete Guide to Preparing Your Dog for the Children* by S. Brian/Wilson Kilcommons. Unless you have previously owned a greyhound or currently have a greyhound or other large dog, GALT does not recommend that families with children under five years of age adopt a greyhound.

There is a non-refundable adoption donation fee of \$350.00, which is tax deductible. **A \$75 deposit is required with submission of the application (\$50 of which is refundable and \$25 of which is non-refundable).** The remaining \$275 adoption fee donation is due when the Greyhound is adopted. For senior dogs (10 years or older) the donation fee is \$225.00. Please complete all fields, and attach any additional sheet(s) if necessary. The donation includes:

- ★ Neuter or spay
- ★ All vaccinations (DHLPP, Bordetella & Rabies)
- ★ A CBC (complete blood count) with serum chemistry panel
- ★ A tick-borne disease panel* with treatment if needed for each
- ★ Heartworm test and fecal test with negative test results
- ★ Dental cleaning and extractions if needed
- ★ A special greyhound martingale collar, leash, muzzle
- ★ HomeAgain Microchipping
- ★ Adoption package with special information and Puppy Membership for one year

*This test, performed by Protatek Laboratory in Arizona, detects Ehrlichia canis, Babesia canis, Rocky Mountain Spotted Fever & Lyme, all diseases prevalent in Texas transmitted from a tick bite. Proper treatment will eliminate this disease; however, if the greyhound is not tested and treated as necessary, the disease can go undetected for years manifesting itself as different illnesses causing difficult, extensive and costly treatment and premature death.



ABOUT YOU AND YOUR HOUSEHOLD

Name of Primary Adopter and Co-Adopter		Address	
City	State	Zip	
e-mail	Fax		
Home Phone	Mobile/Cell Phone		
Employer Primary Adopter:	Work Phone Primary Adopter:		
Co-Adopter:	Co-Adopter:		
Name of contact person who can always reach you	Contact Phone		
Number of Adults in your home:	List children and their ages (use reverse side if needed)		
Are your children respectful & gentle to animals? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name anyone in family allergic to dogs or cats:		

What is the activity level of your household?
 Quiet Moderately active Active Very active

ABOUT YOUR RESIDENCE

Describe the area in which you live: <input type="checkbox"/> City <input type="checkbox"/> Suburban <input type="checkbox"/> Countryside			
Describe your residence: <input type="checkbox"/> Single family home <input type="checkbox"/> Duplex <input type="checkbox"/> Condo / Townhouse <input type="checkbox"/> Apartment <input type="checkbox"/> Mobile home <input type="checkbox"/> Other:			How long at present residence?
Do you: <input type="checkbox"/> Rent <input type="checkbox"/> Own		If apt. or duplex, is there a size/pound restriction?	
If you rent or lease, do you have permission from your landlord to have a dog? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Landlord's Name:		Landlord's Phone Number:	
Do you have a completely fenced yard? <input type="checkbox"/> Yes <input type="checkbox"/> No		Fence Type:	Fence Height
Are you aware that greyhounds must ALWAYS be kept on a leash or in a completely fenced area?			<input type="checkbox"/> yes <input type="checkbox"/> no
If your yard is not fenced, what sort of exercise will your greyhound receive?			



ABOUT YOUR OTHER PETS AND PET CARE

What other pets do you have? (Type, Breed, Name, Age, Sex, Altered) (Use reverse side if necessary)

If you own a cat is it...
 Indoor Indoor/Outdoor

What kind of dental care do you provide your pets?

Do you have a veterinarian?
 Yes No

Is s/he familiar with Greyhounds special needs?
 Yes No

Veterinarian's Name:

Veterinarian's Phone Number:

Veterinarian's Address:

What last name and pet name are the records under? (Use reverse if necessary)

Did you have other pets in your home previously?

Please describe what became of them: (use reverse if necessary)

Have you ever adopted from any other adoption group or shelter? yes no
If so, which one?
Phone number:

Is there a legal ordinance in your area pertaining to animal / pet ownership? (I.e., leash laws, required vaccinations or dog licenses, etc.)

ABOUT YOUR INTEREST IN GREYHOUNDS

How did you hear about our organization?

What made you choose a greyhound?

Do all adults in the household agree to the adoption?

How long have you considered adopting a greyhound?

What is your purpose for adopting? (Mark all that apply)
 House pet Companion Therapy dog Company for another pet



Who will be responsible for the care and training of your Greyhound?

Approximately how many hours would your Greyhound be alone each day?

What arrangements will be made for your Greyhound when you travel, or if you are absent from your home for an extended period of time?

Where will your Greyhound spend its time during the day?

Where will your Greyhound spend its time at night?

To provide food, vaccinations, dental care, registration, and medical care for this Greyhound, how much do you anticipate spending (yearly):
 \$50 \$100 \$200 \$300 \$400 \$600 +

What type of personality / temperament do you think would best fit your household and lifestyle?

Which would you prefer: <input type="checkbox"/> Female <input type="checkbox"/> Male	Why?
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Do you have any preference regarding age or color?
 Do you have a preference for a particular dog?

Occasionally an older Greyhound or one with special needs is available. Would you consider adopting such a dog? Yes No

It may take **SEVERAL WEEKS** for a Greyhound to adjust to its new home. Are you willing and prepared to allow this much time?
 Yes No

A home visit may be required. Do you agree to allow a Greyhound Adoption League representative to do a home visit and make post-adoption phone calls?
 Yes No

When would you be ready for a dog? (It is advisable to have at least three days available when you first bring a Greyhound to their new home. This helps with the transition.)

What do you consider valid reasons for giving up your greyhound?

Moving <input type="checkbox"/>	Separation Anxiety <input type="checkbox"/>	Chewing <input type="checkbox"/>
Digging <input type="checkbox"/>	Problems with housetraining <input type="checkbox"/>	Having a baby <input type="checkbox"/>
Barking <input type="checkbox"/>	Too rough with the children <input type="checkbox"/>	Biting <input type="checkbox"/>
Killing another animal <input type="checkbox"/>	Destructive <input type="checkbox"/>	Other <input type="checkbox"/>

What research have you done about the breed?

Are you willing to return your Greyhound to GALT if you are unable to keep the dog?



Please list any additional comments that you would like for us to consider when reviewing your Greyhound adoption application:
(Use reverse side if necessary)

YOUR REFERENCES

Please list two references that you have known for more than one year. At least one of your references should be a neighbor. References cannot be family members.

Reference 1:

Name (Please Print)	Phone (day)	Phone (evening)
Address	City, State	ZIP

For GALT use only:

Reference 2:

Name (Please Print)	Phone (day)	Phone (evening)
Address	City, State	ZIP

For GALT use only:

YOUR AUTHORIZATION AND SIGNATURES

I/We authorize my/our veterinarian to release information regarding my/our pets to a representative of Greyhound Adoption League of Texas, Inc.

By signing this application, I/we certify that the information supplied herein is true and correct. If the information in this application is found to be false, Greyhound Adoption League Of Texas, Inc. retains the right to decline this adoption request.

Signature	Date
Driver's license #	State
Signature	Date
Driver's license #	State

ABOUT GALT

Greyhound Adoption League of Texas, Inc. reserves the right to refuse adoption to anyone.

Return completed application with \$75 application fee to:

GREYHOUND ADOPTION LEAGUE OF TEXAS, INC.
P.O. BOX 680
ADDISON, TX 75001-0680

For additional information or questions:
 972-503-GALT (4258)

<http://www.greyhoundadoptiontx.org> email: info@greyhoundadoptiontx.org

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