



**Beagle
Rescue**
Victoria inc.

Beagle Rescue Victoria Inc.

Mail: PO Box 235, Glenhuntly 3163

Phone: 0409 535 930

Email: info@beaglerescuevic.org

Web: www.beaglerescuevic.org

ADOPTION APPLICATION

Name: _____

Address: _____

Home Phone: _____ **Work Phone:** _____

Mobile: _____ **Email address:** _____

Driver's Licence No: _____

How did you hear about Beagle Rescue Victoria? _____

1. What beagle are you applying for?

Beagle's name: _____ Doesn't matter

2. What is your preference?

Male Female Doesn't matter

3. What age would you prefer?

Puppy Adult Doesn't matter

4. How many beagles would you like to adopt?

One Two More

Beagle Rescue Victoria Inc. (A0050374H) is a registered not-for-profit organisation
ABN 95 730 602 243

3. **Have you read the page entitled "Is a Beagle For Me?" on our website?**

Yes No

4. **Are you employed?**

Full Time Part Time Unemployed
Pensioner Retired Student

5. **How many adults live in your household?** _____

6. **How many children live with you?** _____

7. **What are their ages?** _____

8. **How many hours a day will your beagle be on its own?** _____

9. **Do you have other pets?** Yes No

If yes, please specify type, breed, sex and whether or not they have been desexed:

10 **Would you consider adopting a beagle who has sustained an injury or who suffers from an existing illness or disability? (Think carefully about your answer. Can you afford to look after an ill or disabled beagle? Could you deal with the heartbreak if the beagle did not live long? However, this can also be a very rewarding experience. Knowing you have given a little darling a last chance at real love and happiness can be very fulfilling).**

Yes No Depends on illness/disability

11. **Would you consider a cross-breed beagle?**

Yes No Depends on appearance Depends on cross

12. **Previously, have you ever owned a beagle?**

Yes

No

13. **If yes, please tell us about your existing beagle and its temperament:** _____

14. **If no, what is your knowledge of the breed?**

14. **If no, please tell us what behaviours and qualities you are looking for in your new beagle?**

15. **If you are a previous dog owner (any breed), how long did you own this dog?**

16. **Where is your dog now?**

Heaven

Re-homed

Surrendered to a shelter

At home

17. **If your dog was re-homed or surrendered, please explain the circumstances of the re-homing/surrender.**

18. In your opinion, which of the following circumstances justifies surrendering a pet? Tick as many as you think applicable.

- | | | | |
|--|--------------------------|---|--------------------------|
| Moving house | <input type="checkbox"/> | Personality clash with other pets | <input type="checkbox"/> |
| Escaping from your yard | <input type="checkbox"/> | Too time consuming | <input type="checkbox"/> |
| Financial problems | <input type="checkbox"/> | Children have lost interest and no longer take responsibility | <input type="checkbox"/> |
| Excessive barking | <input type="checkbox"/> | Ongoing medical problems | <input type="checkbox"/> |
| Toilet training problems | <input type="checkbox"/> | Coat shedding | <input type="checkbox"/> |
| Destructive behaviour | <input type="checkbox"/> | Fears for safety of new baby | <input type="checkbox"/> |
| Fear of pet being lonely while you're away from home | <input type="checkbox"/> | Divorce / relationship break up | <input type="checkbox"/> |

Other – please specify: _____

19. Which best describes your home?

- | | | | | | |
|-------|--------------------------|-----------|--------------------------|-----------|--------------------------|
| House | <input type="checkbox"/> | Townhouse | <input type="checkbox"/> | Apartment | <input type="checkbox"/> |
| Unit | <input type="checkbox"/> | Flat | <input type="checkbox"/> | Acreage | <input type="checkbox"/> |

20. Do you:

- | | | | | | |
|-----|--------------------------|------|--------------------------|-------------------|--------------------------|
| Own | <input type="checkbox"/> | Rent | <input type="checkbox"/> | Live with parents | <input type="checkbox"/> |
|-----|--------------------------|------|--------------------------|-------------------|--------------------------|

If renting, you will need to attach to your application approval from your landlord that you may own a dog.

21. Do you have secure fencing (i.e. can your beagle escape under or over the fence or get through or under any gates)?

- | | | | |
|-----|--------------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

22. What is the approximate size of the secured fenced area where your beagle will have access?

23. Do you have a doggie-door?

Yes No

24. Is your motor vehicle air-conditioned?

Yes No

25. Do you have a pool?

Yes No

26. If yes, is it beagle-proof?

Yes No

27. Where do you envisage your beagle sleeping? _____

28. Are you aware that beagles cannot be let off leash because they will run off?

Yes No

29. Are you aware that beagles are vocal at times and can bay loudly?

Yes No

30. Are you aware that beagles can take up to 30 days to adjust to a new environment?

Yes No

31. Do you pledge to allow your beagle indoors?

Yes No

32. Do you pledge to have your beagle vaccinated, wormed and heart-wormed at the required intervals?

Yes No

33. Do you pledge to purchase products which will keep your beagle flea-free?

Yes No

34. Do you pledge to seek veterinary treatment when required?

Yes No

35. Do you pledge to return your beagle to us if you encounter any difficulty?

Yes No

36. Do you pledge to love and care for your beagle and consider his/her needs to be of supreme importance?

Yes No

37. Would you agree to allow BRV to visit you at your home prior to adoption?

Yes No Unsure

38. Would you object to an occasional phone call from BRV inquiring about your beagle's well-being?

Yes No Unsure

39. Is there anything else BRV should know in accessing your application?

39. Please provide the details of your regular vet clinic:

Name: _____

Address: _____

Phone: _____

40. Please provide the names and contact phone numbers of two personal referees:

(a) _____

(b) _____

I, the undersigned, realize the commitment I am making to my beagle and agree to honour all pledges made within this application.

I agree to relinquish my beagle if it is established that I have given false or misleading information in my application OR if allegations of abuse or neglect are reported to Beagle Rescue Victoria Inc. or any other animal welfare agency.

PLEASE BE ADVISED that Beagle Rescue Victoria Inc. reserves the right to seize the beagle from your property post-adoption if it is established you have given false or misleading information in your application OR if allegations of neglect or abuse are reported to us or any other animal welfare agency.

Name: _____
(please print)

Signature: _____

Date: _____