

NATIONAL WHIPPET CLUB OF CANADA

**Preliminary Adoption Application**

Please send fully completed form to [nwccwhippetrescue@gmail.com](mailto:nwccwhippetrescue@gmail.com)



Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

City, Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Marital Status:  married  single

Do you work outside the home?  Yes  No Work Hours: \_\_\_\_\_

Occupation: \_\_\_\_\_ How long? \_\_\_\_\_

# of children: \_\_\_\_\_ Ages of children: \_\_\_\_\_

Do you:  rent  own? If renting, does landlord allow pets?

Type of dwelling:  House  Apt  Condo  Mobile Home

Years at present address: \_\_\_\_\_

Are you planning to move within the next 6 months?  Yes  No

What are your plans for your pet(s) if you move? \_\_\_\_\_

Do you have a fenced yard?:  Yes  No

Have you ever owned a whippet?  Yes  No

Do other adults like the idea of getting a whippet?  Yes  No

Have you ever taken a dog to a shelter/pound?  Yes  No

How many pets do you own? \_\_\_\_\_

Breed(s) or kinds: \_\_\_\_\_

Are they spayed/neutered? \_\_\_\_\_

Why do you want a Whippet? \_\_\_\_\_

Will your dog be exposed to young children? \_\_\_\_\_

Do you prefer a  male  female  either

Upper age limit you will consider for adoption: \_\_\_\_\_

Are you financially able to care for your dogs' health? \_\_\_\_\_

What will you do with your Whippet during vacations? \_\_\_\_\_

Where will the dog be kept during the day? \_\_\_\_\_

Where will the dog sleep at night? \_\_\_\_\_

What type of exercise will the dog get? \_\_\_\_\_

Do you have any objections to using a crate?  Yes  No

Your Veterinarian's name and address: \_\_\_\_\_

Will you return the dog to rescue if unable to keep? \_\_\_\_\_

May a representative of Whippet Rescue visit you at home? \_\_\_\_\_

How did you find out about Whippet Rescue? \_\_\_\_\_

May we contact you for additional information? \_\_\_\_\_

Is there anything else you feel we should know? \_\_\_\_\_