



ADOPTION APPLICATION TRINITY OF HOPE DOG RESCUE

***"If not us, then who, if not now, then when,
if not this dog, then which dog." Anon.***

Thank you for your interest in adopting a rescued dog. Providing the following information will assist us in understanding your requirements and expectations, as well as the environment you can provide for a rescued dog. We realize that this application form is long. The application is designed to cover all types of situations and all types of requirements that a rescued dog may have, there are no right or wrong answers. Because everyone involved with THDR is a volunteer, we appreciate that you take the time to answer all the questions as that helps us when reviewing the information. We will try to be as respectful of your time when we contact you.

Please use a pen to print your answers. If you would prefer this application in Microsoft Word format, please e-mail Info@TrinityOfHope.on.ca and request Microsoft WORD format. You may type your answers and e-mail the soft copy back. We would ask that you change the file name to your last name and month and year that the application was submitted. You are encouraged to provide additional information on separate paper or by inserting additional text, etc. Please circle or bold answers where appropriate and be sure to answer all the questions or mark N/A when Not Applicable.

TRINITY OF HOPE DOG RESCUE reserves the right to refuse any application. TRINITY OF HOPE DOG RESCUE is committed to being the dog's advocate. THDR does not place dogs on a first-come, first serve basis.



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PERSONAL INFORMATION

YOUR NAME:

SPOUSE/PARTNER'S NAME:

ADDRESS:

CITY:

PROV:

POSTAL CODE:

TOWNSHIP:

COUNTY:

CONTACT INFORMATION

EMAIL ADDRESS:

FAX:

HOME PHONE:

WORK PHONE:

MOBILE PHONE:

PAGER:

BEST TIME TO CALL:

WHERE: () Home () Work

EMPLOYMENT HISTORY

YOUR OCCUPATION:

EMPLOYER:

SPOUSE'S OCCUPATION:

EMPLOYER:



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HOUSEHOLD INFORMATION

NUMBER OF PEOPLE IN YOUR HOUSEHOLD

ADULTS

WOMEN ()

MEN ()

CHILDREN:

GIRLS:

AGES:

BOYS:

AGES:

**Does Anyone In Your
Family Have Allergies?**

() Yes () No

TYPE:

**How important is it to your
family to have a clean
house?**

() Very Important

() Moderately

Tell us why your family wants a rescued dog:

How will a rescued dog fit in with your hobbies, activities, and lifestyle?

How long have you been thinking of adopting a rescued dog?

Why are you interested in adopting a rescued dog?



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What traits would do you feel are essential for a rescued dog to have?

- 1.
- 2.
- 3.
- 4.
- 5.

What traits would you consider undesirable for a rescued dog to have?

- 1.
- 2.
- 3.
- 4.
- 5.

If the rescued dog or one of your dogs were to display any of the undesirable traits listed above, what would you do? (check any that apply)

- | | |
|---|--|
| <input type="checkbox"/> Consult w/my vet | <input type="checkbox"/> Surrender the dog to the SPCA |
| <input type="checkbox"/> Contact a trainer | <input type="checkbox"/> Give the dog away |
| <input type="checkbox"/> Try to fix the problem | <input type="checkbox"/> Other (please explain): |

If you were unable to fix the undesirable trait, what would you do?

- | | | |
|---|--|--|
| <input type="checkbox"/> Contact the SPCA | <input type="checkbox"/> Call rescue | <input type="checkbox"/> Give the dog away |
| <input type="checkbox"/> Manage the problem | <input type="checkbox"/> Other (please explain): | |



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Where have you looked for a rescued dog?

- Humane Society Newspaper Breeder
 Rescue groups Through friends Kennel Club
 Other (explain):

If you have applied to adopt a dog through a rescue group in the last six months, please indicate the rescue group contact information:

Which family member would be the primary caretaker of the rescued dog?

The Primary Care Giver of the rescued dog should respond to the remainder of the Application Form. If other individuals will be involved in the direct care of the Rescued Dog, they should fill out a separate Application Form.

Do you work? () Full-Time () Part-Time

If you work full-time, do you have flexible hours or are you able to come home for lunch?

If yes, how many days per week is this option available?

- () Daily () 2-3 days/week 3-4 days/week

Do you currently have a dogwalker or neighbour who lets your dog(s) out?

- () Yes () No

Would you consider hiring a dogwalking service to come into your home to walk the dog while you are at work? () Yes () No () Maybe

If yes, how many days per week would you consider hiring such a service?

- () 1-2 days/week () 3 days/week () Daily during the work week

If yes, please provide the name and contact information:

How many hours per day do you think one should try to spend actively interacting with a dog for the dog to maintain a healthy mental and physical attitude? _____hrs

How would you describe your personality (e.g, submissive, dominate, shy, scientific, artistic, easy going, demanding, Type A, procrastinator, tenacious, etc.)



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When friends' describe you and your relationship with your pets, what words do you think they'd use (e.g., kind, compassionate, loyal, someone with a lot of common sense, paranoid when it comes to the animals, etc.) _____

If your dog, or previous dog could talk, what do you think your dog would say about you as his/her guardian?

Is anyone in the family opposed to adopting a rescued dog? () Yes () No

EXISTING DOGS

If you have a dog, where did you get your dog?

- () Humane Society () Newspaper () Breeder
() Rescue groups () Through friends () Kennel Club
() Other (explain):

How old was the dog when you got it?

How long did you keep the dog?

Did you grow up with dogs? () Yes () No

If yes, what is your fondest memory of your childhood dog?



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If yes, what is your saddest memory of your childhood dog?

Have you ever given a pet away? () Yes () No

If yes, what were the circumstances?

Are there activities you feel your dog MUST enjoy to be a part of your family (e.g., cottage life, agility, becoming a therapy dog, etc.):



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CURRENT AND PREVIOUS ANIMALS IN THE HOUSEHOLD

Please list the pets you currently have, as well as those you've had in the past 10 years
(feel free to include an additional sheet of paper, if required):

ANIMAL 1 (NAME)

Type (dog, cat, bird, etc.)

Breed: Indoor Outdoor N/A

Age:

Gender: Male Female

Neutered/Spayed: Yes No

Current on vaccinations: Yes No

Current on hw prevention Yes No If yes, brand:

ANIMAL 2 (NAME)

Type (dog, cat, bird, etc.)

Breed: Indoor Outdoor N/A

Age:

Gender: Male Female

Neutered/Spayed: Yes No

Current on vaccinations: Yes No

Current on hw prevention Yes No If yes, brand:

ANIMAL 3 (NAME)

Type (dog, cat, bird, etc.)

Breed: Indoor Outdoor N/A

Age:

Gender: Male Female

Neutered/Spayed: Yes No

Current on vaccinations: Yes No

Current on hw prevention Yes No If yes, brand:

ANIMAL 4 (NAME)

Type (dog, cat, bird, etc.)

Breed: Indoor Outdoor N/A

Age:

Gender: Male Female

Neutered/Spayed: Yes No

Current on vaccinations: Yes No

Current on hw prevention Yes No If yes, brand:



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Please indicate what happened to the pets you previously owned (include the pet's name and how long you owned the animal, feel free to use additional space than the amount provided):

EXERCISE ROUTINE

How frequently do you plan on walking a dog?

Daily 2-3 times/week on the weekend not often

How else do you plan on exercising a dog?

Where would you plan to you walk your dog?

Would you walk a dog on or off leash in public areas?

Please describe your neighbourhood (parks, major traffic routes, etc.):



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HOME ENVIRONMENT

Please indicate the type of home in which you live.

- | | | |
|---|--|--|
| <input type="checkbox"/> Apartment | <input type="checkbox"/> Condo | <input type="checkbox"/> Townhouse |
| <input type="checkbox"/> Rowhouse | <input type="checkbox"/> Cooperative Housing | <input type="checkbox"/> Single dwelling |
| <input type="checkbox"/> Semi-detached | <input type="checkbox"/> Duplex | <input type="checkbox"/> Triplex |
| <input type="checkbox"/> Farmhouse | | |
| <input type="checkbox"/> Other (explain): | | |

Is there a yard?

If yes, please describe the yard (size, etc.):

Is the yard: fully fenced (front and back) partially fenced (front or back) not fenced

Fully fenced = a fence that is at least 5 ft. in height and includes gates and encloses all of the yard.

*Partially-fenced would be a fence that is at least 5 ft in height, includes gates, and encloses a portion of the yard on all sides, e.g., is not open on one side or *hedged* on one side.*

If your yard is not fenced or if the fencing is not secure, (e.g., does not include gates, etc.), do you plan to finish the fencing? Yes No Depends on finances Hadn't thought about it

If yes, please give an approximate date the fencing will be finished:

If yes, please indicate the height of the fence and the type of fencing you will install:

Would the dog be left in the yard or run unsupervised when you aren't home?

Yes No Sometimes

Do you have a secondary residence? Yes No Planning on purchasing one

If you have a secondary residence, is part of it securely fenced? Yes No

If not, how will you ensure that the dog does not roam?

- Attach a line to the dog (but not affixed to anything)
- Tie the dog up
- Take the dog out only on a leash (flexi or other)



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Where will the rescued dog spend most of its time when you are home? (check any that apply):

- | | | |
|---|---|---|
| <input type="checkbox"/> Loose indoors | <input type="checkbox"/> Crate | <input type="checkbox"/> Basement |
| <input type="checkbox"/> Garage | <input type="checkbox"/> Dog room | <input type="checkbox"/> Laundry room |
| <input type="checkbox"/> Bathroom | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Fenced yard |
| <input type="checkbox"/> Chained outside | <input type="checkbox"/> Dog run | <input type="checkbox"/> Outdoor kennel run |
| <input type="checkbox"/> On lead attached outside | <input type="checkbox"/> Loose outdoors | <input type="checkbox"/> Electronic fencing |
| <input type="checkbox"/> Other (explain): | | |

When you are at work or away from the house, where will rescued dog be? (check any that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Loose indoors | <input type="checkbox"/> Crate | <input type="checkbox"/> Basement |
| <input type="checkbox"/> Garage | <input type="checkbox"/> Dog room | <input type="checkbox"/> Laundry room |
| <input type="checkbox"/> Bathroom | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Fenced yard |
| <input type="checkbox"/> Chained outside | <input type="checkbox"/> Dog run | <input type="checkbox"/> Outdoor kennel run |
| <input type="checkbox"/> On lead attached outside | <input type="checkbox"/> Loose outdoors | <input type="checkbox"/> Electronic fencing |
| <input type="checkbox"/> Other (explain): | | |

Where will the rescued dog sleep? (check any that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Loose indoors | <input type="checkbox"/> Crate | <input type="checkbox"/> Basement |
| <input type="checkbox"/> Garage | <input type="checkbox"/> Dog room | <input type="checkbox"/> Laundry room |
| <input type="checkbox"/> Bathroom | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Fenced yard |
| <input type="checkbox"/> Chained outside | <input type="checkbox"/> Dog run | <input type="checkbox"/> Outdoor kennel run |
| <input type="checkbox"/> On lead attached outside | <input type="checkbox"/> Loose outdoors | <input type="checkbox"/> In a dog house |
| <input type="checkbox"/> In bed with us | <input type="checkbox"/> In bed with a child | <input type="checkbox"/> In bedroom w/us |
| <input type="checkbox"/> Other (explain): | | |

VISITORS TO THE HOME

Do you have frequent houseguests? Yes No

If yes, how frequently? every weekend a couple of times a month one a month Other

Do you have friends/family members who enter your home without knocking or waiting for you to answer the door? Yes No

Would you be willing to change that policy to work with the dog on its door manners? Yes No Depends



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Do you welcome your friends' dogs to come with when they visit? () Yes () No ()
Some

Please tell us about those dogs:

TRAINING EXPERIENCE

If you have a dog or have owned a dog, were obedience classes part of the training plan?
() Yes () No

If yes, to what level of classes have you taken a dog?

Will training plan be part of your expectations for a rescued dog? () Yes () No

What training method do you enjoy most:

- () positive reinforcement (food rewards)
- () using a choke collar (pop-n-jerk)
- () positive reinforcement (praise only, want the dog to work for me)
- () I don't really like to do training

Have you ever worked with a *problem* dog? () Yes () No

If yes, what type(s) of problem(s) and how did you work with the dog? (e.g., separation anxiety, gradually got the dog accustomed to its crate and being alone by leaving the room for five minutes, gradually extended the time until the dog didn't bark when I left.)

Do you think that over time you will be able to train the rescued dog so that it can be safely off leash in a public place? () Yes () No () Uncertain

How much time and effort to you expect to devote to training an adopted rescue dog?

Would you consider using a crate for an adopted rescue dog? () Yes () No

Please explain why or why not:



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If you plan on using a crate, when would you use the crate?

- During the day Only at night When we have to
leave the dog alone
- Only for the first 2 weeks Whenever necessary
(please explain)

Do you currently have a dog crate? Yes No

Size of crate:

If you have a dog or had one in the past, tell us how you housebroke it or trained it to walk nicely on a lead:

CHILDREN IN HOUSEHOLD/VISITING CHILDREN:

If you don't have children, do you have children who frequently visit your home?
 Yes No

How would you manage visiting children and their interaction with a rescued dog?

What are the ages of the children who visit your home?

How frequently do the children visit?

What types of activities would involve visiting children and a rescued dog?

Would these activities be supervised by an adult? Yes No Sometimes

Do neighbourhood children use your yard as a shortcut to a local park or school?
 Yes No

Do you feel the children in your life are mature enough to be around dogs?
 Yes No



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VETERINARY/HEALTH CARE INFORMATION:

What animal hospital do you use: (name of vet, address, phone #)

Name of Animal Hospital:

Attending Veterinarian:

Address:

Phone #:

Fax #:

Which veterinary clinic do you use?

Name:

Address:

Phone #:

Fax #:

Vet's name:

Does your vet provide 24-hours emergency care? () Yes () No () Don't know

Can you afford emergency veterinary care? () Yes () No () Depends on amount

Would you consider buying pet insurance for a rescued dog? () Yes () No () Maybe

If you are interested in adopting a rescued Giant breed, are you familiar with the condition commonly called "bloat?" () Yes () No () Somewhat

How much would you expect the emergency surgery that is performed to save a dog's life if it is bloating to cost? _____

Have you spoken with your veterinarian about bloat? () Yes () No

Do you think pets should be spayed or neutered? () Yes () No

Do you provide heartworm prevention, annual vaccinations and other necessary vet care for your pets?

() Yes to all

() No to all

() Yes, annual vaccinations but not heartworm

() No I don't believe in giving my dogs chemicals.

Are you aware of your responsibilities to license your pet and respect local leash laws and scoop-n-poop by-laws? () Yes () No () Somewhat

Phone # for the by-law officer/animal control officer where you live:



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If you live in Ontario, are you familiar with the changes to the Dog Owners' Liability Act with respect to menacing behaviour, increased responsibilities, and higher fines for dogs that have displayed menacing behaviour?

Yes No Somewhat

Are you prepared to take the necessary precautions to prevent a rescued dog from behaving in such a way that its behaviour, e.g., barking along the fence, etc., could be construed as menacing? Yes No

How much do you think it costs (annually) to care for a dog (this includes vet care, training, food and expenses associated with owning a dog)?

Do you feel that you are financially able to afford a dog? Yes No

If faced with a decision to continue to provide care for a dog, would this decision be based on:

Financial Time restraints Quality of Life Other (please explain)

MISCELLANEOUS INFORMATION

What will you do with the dog if you go on vacation?

If you have a pet sitter, please provide:

Name:
Address:
Phone #:
e-mail:

If you use a kennel for boarding, which kennel?

Name:
Address:
Phone #:
e-mail:

Do you own a car, van or pickup Other (please indicate)?

How will the rescued dog ride in the vehicle?

restrained by a seatbelt unrestrained in crate in the box Other (explain):

Are you prepared to alter your lifestyle to adapt to the needs of the rescued dog



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Yes No Somewhat

If you are willing to alter you lifestyle somewhat, what would you not be willing to do? (e.g., not willing to crate a dog that can't be left home alone, not willing to have a dog I can't take everywhere I go, not willing to have a dog that doesn't tolerate cats, not willing to have a dog that is an escape artist, etc):

Are you willing to take responsibility for the rescued dog for the next 5-7 years, including annual vet checks, heartworm prevention and required vaccinations? Yes No

Are you aware that the rescued dog may, at some point, invariably destroy or break something of yours ? Yes No

Are you aware that a rescued dog will inevitably come with some 'baggage' and need retraining? Yes No

Are you prepared to do the retraining required? Yes No

Do you realize that some of the dog's baggage will be part of its life forever and may require lifestyle management instead of training? Yes No

Would you be able to accept that the dog's baggage is part of its life? Yes No

**Would you be willing to manage a dog's behaviour?
 Yes No Depends**

What behaviour would you be willing to manage (e.g., crating the dog when not home if the dog is destructive if left alone, boarding the dog if the dog is not comfortable when visitors come, crating the dog on Haloween to ensure the dog cannot escape when the door is opened for the kids, etc.):

**Would you be willing to follow the guidelines for integrating a rescued dog in your home?
 Yes No**

Are you prepared to accept that although we have had rescued dog vet checked, there may be undiscovered health problems? Yes No

Is there anything else you would like to tell us about your family and its suitability to adopt a rescued dog?



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Please check any areas you would like to discuss with a Trinity of Hope Dog Rescue volunteer:

- | | | |
|---|---|--|
| <input type="checkbox"/> Crate Training | <input type="checkbox"/> Housebreaking | <input type="checkbox"/> Exercising |
| <input type="checkbox"/> Introducing a new pet to your home | <input type="checkbox"/> Where the dog should be when you're not home | <input type="checkbox"/> Where the dog should sleep |
| <input type="checkbox"/> Where you should board your dog | <input type="checkbox"/> What to do if you can't keep the dog | <input type="checkbox"/> Obedience Training |
| <input type="checkbox"/> How to correct bad habits | <input type="checkbox"/> Disciplining your dog | <input type="checkbox"/> Copy of Dog Owners' Liability Act |
| | | <input type="checkbox"/> Other: |

Please provide two personal references (vet reference already provided above) (preferably not a relative or person who does not know you with your dogs). We would appreciate it if you would advise your references that you have given us permission to contact them.

1. Name:
Address:
Phone:
E-mail or fax:

2. Name:
Address:
Phone:
E-mail or fax:

When would it be convenient for a rescue volunteer to meet with you in person?

To return this form:

By e-mail:

Adoption@TrinityOfHope.on.ca

By fax:

613-838-7286 (fax line only)

To return by mail, please send to:

Trinity of Hope Dog Rescue
P.O. 95
Manotick, ON K4M 1A2

A non-refundable \$10 processing fee applies to all applications submitted by mail.

Submission of this Adoption Application does NOT indicate any commitment on the part of TRINITY OF HOPE DOG RESCUE to place a rescued dog in your home. SHOULD YOU



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BE APPROVED TO ADOPT A DOG FROM TRINITY OF HOPE DOG RESCUE, you will be required to sign a binding Adoption Contract and make a donation to help offset costs incurred for the rescued dog while under the aegis of TRINITY OF HOPE DOG RESCUE.

Trinity Of Hope Dog Rescue relies on people who care about unwanted dogs in Canada. In the event that Trinity of Hope Dog Rescue does not have a rescued dog at this time to match your needs and household, please indicate if you would like to help Trinity of Hope help the dogs and in what capacity:

- Financial donation (enclosed)
- As a potential foster home
- Volunteer driver
- Other - _____

NOTE: 100% of all financial contributions are applied to outstanding veterinary bills or to pay for obedience courses for dogs while in foster care to help get them ready to move home. Obedience classes cost \$60.00, vet bills range from \$30 to \$300. Contributions to help only with veterinary bills may be made payable to: Trinity Of Hope Dog Rescue - with a note that the funds are to be applied to (1) orthopedic surgery fund, (2) spay/neuter fund; (3) emergency bloat surgery fund; (4) dogs with special-needs fund; or (5) senior dog dentistry fund. If you wish for your contribution to go towards obedience courses should be made payable to Trinity of Hope Dog Rescue as we use two training facilities depending on the start date of the course best suited for the particular dog. Please indicate that the donation is to be used for obedience training.

.....

CONTRACT: The contract specifies, among other things, that the dog will receive proper specified home and vet care, including an annual exam and shots, heartworm preventative, etc.; will be licensed and identified; will never be taken to a shelter or given away; will not be used for anything other than a family pet; will live indoors; will not be chained to a doghouse as a yard dog; that you agree to contact this rescue if you can no longer keep the dog so that this rescue can find the rescued dog a new adoptive home; and it allows rescue to contact you and your vet for verification of the dog's welfare. This rescue reserves the right to remove the dog from your home if the terms and condition of the contract are violated. There is also a release of liability statement.

DONATION: There is an adoption donation requested for all dogs placed. We hope to recover the vet costs and training costs for each rescued dog. Any additional donation received is used to help defray other cost associated with providing for abandoned dogs, e.g., helping a rescue group outside of our area pay for heartworm treatment, helping with orthopedic surgery costs, sponsoring the spay or neuter of a dog in a shelter that will not release the dog to rescue, etc. We believe that by helping one another, we can make a difference. NONE OF THDR's volunteers are paid for the time they give to the foster dogs. If funds are available, we will reimburse our volunteers for costs incurred to help care for the dogs (food, supplements, shampoo, etc.).

Please realize that dogs need vet care throughout their lives, including annual exams and boosters, monthly heartworm and flea prevention, emergency care, etc. If you cannot



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afford the adoption donation, you most likely cannot afford to adopt or purchase a dog.
Please consider this before applying to adopt a dog or contacting a breeder.

Are these terms acceptable to you? If so, please indicate by signing below:

I certify that the information contained in this application is true and complete. I authorize Trinity of Hope Dog Rescue to contact veterinarians, landlord(s), trainers, pet sitters, boarding kennels and personal references to confirm all statements in this application are true, and to do a home study. Further, I understand that should I be approved to adopt a dog from TRINITY OF HOPE DOG RESCUE that I am making a commitment for the life of the dog and will comply with the terms and conditions of the adoption contract. That I have read the information about the Adoption Contract and the donation requirement and will comply with all terms in a timely manner should I be approved to adopt a rescued dog from Trinity Of Hope Dog Rescue, P.O. Box 95, Manotick, ON K4M 1A6.

(signature) _____

Print name: _____ Date signed: _____