



SOUTHERN CALIFORNIA BOSTON TERRIER RESCUE

ADOPTION APPLICATION

www.bostonbuddies.org
contactus@bostonbuddies.org

**Please return completed application to:
Boston Buddies, Inc., 19051 Goldenwest St., #106-145,
Huntington Beach, CA 92648
Or Fax to (951) 698-9690**

DATE: _____

Thank you for your interest in adopting a Boston Terrier from Boston Buddies. Your answers to the questions on this application will assist us in selecting the best Boston Terrier for you and your family. Any and all information you provide on this application will be kept strictly confidential.

Once we have reviewed and approved your application for further processing, a volunteer will contact you to schedule the required home check visit. We will contact you as soon as possible and we appreciate your patience as **this process may take up to three weeks.**

Please note that Boston Buddies only adopts our available dogs to homes in Southern California.

Name: _____ Age: _____

Address: _____
Street, City, State, Zip

Phone: _____ Email: _____

___ Single ___ Married If married, spouse's name: _____

Children: Number/Ages: Boys _____ Girls _____

Please note that Boston Buddies does not place dogs in homes with children under the age of eight.

Others in household who will have contact with the dog: _____

Are you interested in any of the Boston Buddies dogs currently listed as available on our web site? ___ Yes ___ No

If yes, which one(s): _____

Do you understand that although you may have seen a few pictures and read a brief summary about a particular dog on our website, that dog may have some personality traits that are not the most suitable for your family situation and dynamics?

___ Yes ___ No

Do you understand there is also a chance that the dog you are originally interested in will be placed in an approved home prior to the completion of your application review and home check?

___ Yes ___ No

In either case mentioned above, please do not give up! Once your application and the home check are complete, Boston Buddies will have the information we need to pick the dog that is best suited to your family. Our adoption coordinators have many years of experience with placing the right dogs in the right homes. We appreciate your trust in our ability to introduce you to the dog(s) that will be right for your home.

Have you ever owned a Boston Terrier before? Yes No

Why are you interested in adopting a Boston Terrier?

What qualities or traits do you NOT want to find in a Boston Terrier?

Do you understand that Bostons are highly energetic dogs and can be destructive if not exercised enough? Yes No

Are you interested in a male or female dog? Male Female No Preference

What Age Range are you interested in?: 0 – 3 4 – 6 7 – 9 10+

Would you accept a dog with special needs? Yes No

If yes, what kinds of special needs are acceptable?

Allergies Blindness Deafness Epilepsy Incontinence

One-eyed Arthritis Cushings Separation Anxiety

Other: _____

Are you willing to work with house training a Boston? Yes No

Would you consider a Boston mix? Yes No

Would you adopt two dogs that have come from the same home & need to stay together? Yes No

Should your new pet be: Dog friendly Cat friendly Doesn't Matter

Other pets currently owned and living in household (Species, Breed, Age, Sex):

Are they spayed/neutered? Yes No If No, why not: _____

Are your current pets up to date on their annual vaccinations? Yes No If No, why not: _____

Previously owned dogs not currently living in the household. If they are no longer living in the household, why not?

Do you own your own home or rent? Own Rent
 Apartment Town Home/Condo House

If you rent, does your landlord approve of dogs on property? Yes No

Please provide name and number of your landlord as they will be contacted for verification:

Do you have a Doggie Door? Yes No

Do you have a fenced in yard? Yes No If yes, Kind of fence: _____ Height: _____

Where will the dog spend the day?

Loose in house Certain room(s) in house Crate Garage Dog Run Fenced Yard

Other, please explain: _____

Where will dog spend the night?

On the bed Dog bed in bedroom Loose in house Certain room(s) in house
 Crate Garage Dog Run Fenced Yard

Other, please explain: _____

On average, how many hours will the dog be without human company daily?

0 (someone is always home) 1 - 2 hours 2 - 4 hours 4 - 6 hours 6 - 8 hours 8 - 10 hours

Other, please explain: _____

What household privileges are you going to give your dog?

Sleep on bed Allowed on Furniture Have their own bed Access to entire house Access to certain rooms

Other, please explain: _____

What types of activities do you do/plan to do with your dog?

When you go on vacation, what do you do with your dog?

Have you filled out an adoption application with any other rescue organization? Yes No

If yes, to which organization have you applied and when? _____

Have you adopted a dog from Rescue in the past? Yes No

If so, from which organization and when did you adopt? Please provide name and contact information of rescue organization*:

*Sharing information between reputable rescue organizations can significantly shorten the adoption process. Please note that we will only share your information with another organization after receiving your permission to do so.

How did you hear about Boston Terrier Rescue? _____

Personal references:

Name: _____

Relation to you: _____

Phone Number: _____

e-mail address: _____

Name: _____

Relation to you: _____

Phone Number: _____

e-mail address: _____

Additional Comments:

RELEASE FOR VETERINARY REFERENCE:

I, (please print your whole name) _____, hereby give permission for any veterinarian providing service to me/my animals to release medical information on any/all of my animals to Boston Buddies, Inc., Southern California Boston Terrier Rescue.

Signature

My current veterinarian is:

Name: _____

Address: _____

Telephone: _____

PLEASE LET YOUR VET KNOW WE WILL BE CALLING FOR A VET REFERENCE.

(This release is not limited to the veterinarian named above.)

FORM SUBMITTAL INSTRUCTIONS:

To submit your application via e-mail, please type your signature on the signature line above, click on the "Submit by Email" button below and send the e-mail that is automatically generated to contactus@bostonbuddies.org. (PLEASE NOTE: You must have a working e-mail program on your computer to use this option.)

To submit your form via mail or fax, please click on the "Print Form" button below. Sign the signature line above and mail or fax to the address or fax number on page 1 of this form.