

APPLICATION TO ADOPT AN ENGLISH BULLDOG

Buddies Thru Bullies, Inc.
1524 Rolling Meadows Dr.
McDonough, GA 30253



INSTRUCTIONS: Please fill out this application (4 pages) and return to the address above.
This address is for the volunteer coordinator who receives and processes the adoption applications only. The dogs are fostered primarily in South Florida.

If you have any questions, please call 305-666-8870 or email bullymax1@aol.com

SECTION 1

Your name: _____

Name(s) of Spouse/Partner/Roommate: _____

Address: _____

City: _____ State/Province: _____

Zip/Postal: _____ Country: _____

Home phone: _____ Cell phone: _____ Fax: _____

Email address (please print legibly): _____

Occupation: _____ Hours: _____

SECTION 2

Please describe below the physical characteristics of a Bulldog that you might be interested in adopting.

Age: _____ Gender: _____ Reason for gender preference: _____

Weight: _____ Coloring: _____ Other: _____

I would be willing to work with a dog that still needed some fine tuning on housetraining: yes no maybe

I would be willing to consider adopting a "bonded" pair, i.e. mother & daughter: yes no

I would consider adopting a dog that might need daily medications, i.e. eye drops: yes no

Why do you want to adopt a Bulldog from Buddies Thru Bullies? _____

Have you ever owned a Bulldog? _____

**** If you need more space, please use the back of the pages ****



SECTION 3

Your dogs:

How many dogs do you have right now? _____

Please describe each dog by circling the information, and filling in the blanks provided below.

Male/neutered/Female/spayed/age: _____ Breed of Dog: _____

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If you do not have a dog now, have you owned one in the past 10 years? _____

If so, what happened to your dog? _____

Please check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> I have purchased a dog from a breeder in the past | <input type="checkbox"/> I currently own a dog with physical problems |
| <input type="checkbox"/> I have purchased a dog from a store in the past | <input type="checkbox"/> I currently own a dog with behavioral problems |
| <input type="checkbox"/> I have adopted a dog from a shelter in the past | <input type="checkbox"/> I currently own a dog with dominance problems |
| <input type="checkbox"/> I have inherited a dog in the past | <input type="checkbox"/> My dog(s) get along well with other dogs |
| <input type="checkbox"/> I have found a stray and kept it | <input type="checkbox"/> My dog(s) do not get along well with other dogs |

Any other pertinent information: _____

SECTION 4

Other pets:

How many cats do you have? _____ Ages of cats: _____ Declawed: yes no

Are they dog-friendly? yes no Other information: _____

Please check all that may apply:

- I own birds, if so, how many and what size: _____
- I own rodents, i.e., hamsters, guinea pigs, gerbils, rabbits, ferrets, etc. _____
- I own other pets not listed. Please specify the animal: _____

SECTION 5

Children:

Are there any children living in your home? yes no

Do children frequently visit your home? yes no

How many children? _____ Ages: _____



SECTION 6

Your home:

Please check the type of residence that you live in.

- Single Family Home
 Townhouse
 Apartment
 Condominium
 Mobile Home
 Duplex
 Do you rent? yes no
 Do you own your residence? yes no

If you rent, we require written permission from your landlord, indicating that it is okay for you adopt a dog from us. Please enclose the letter from your landlord, including a name and a contact number.

How many adults live in your home? _____ Other information: _____

Is your yard fenced? yes no
 Do you have a pool or hot tub? yes no

Are there any community restrictions on the number, size or type of your dogs? yes no

Do you have stairs? yes no
 Do you have mostly carpet: mostly tile:

Other information: _____

How will your new dog spend its days?

- Indoors Outdoors Crated Basement Garage Baby-gated in a room
 Dog House Back Porch/Patio Kennel run
 Other: _____

How will your new dog spend its nights?

- Indoors Outdoors Crated Basement Garage Baby-gated in a room
 Dog House Back Porch/Patio Kennel run
 Other: _____

Home visit:

You agree to allow a Buddies Thru Bullies representative to visit your home, by appointment, as part of the application process. At our discretion, out of the area applicants may have a scheduled phone interview in place of the actual home visit.

SECTION 7

Veterinarian Reference:

Applicants who have pets must submit a reference letter from their veterinarian or may list below contact information for the veterinarian:

Name of Veterinary Clinic: _____

Address: _____

Phone: _____ Fax: _____

I give permission for the veterinary clinic listed above to release information about my pets to Buddies Thru Bullies.

Signature: _____

Date: _____



Personal / Employer References:

1.	Name	Relationship to Applicant
	Address	Phone
2.	Name	Relationship to Applicant
	Address	Phone

Should Buddies Thru Bullies be successful in finding a suitable match for your family, there will be an adoption fee for the dog. The adoption fee can range from \$50 to as much as \$350, which is due and payable upon receipt of the ADOPTION CONTRACT.

If this application is sent to us incomplete, it will not be processed. Be sure to fill out the form completely, and include the required documents (i.e. letter from landlord for renters) when when sending it to us. Please, send everything in ONE package.

All the information I/we have provided in this application is true and correct. If any of the information changes, or we decide not to adopt a dog, I/we will notify Buddies Thru Bullies, promptly.

Signature	Date
Signature, spouse/roommate/partner	Date

For Buddies Thru Bullies use only:

<input type="checkbox"/> <i>Current or Former BTB Member</i> <input type="checkbox"/> <i>Form filled out completely</i> <input type="checkbox"/> <i>Letter from Landlord</i> <input type="checkbox"/> <i>Approved / Date: _____</i> <input type="checkbox"/> <i>Not Approved//Date: _____</i>	<input type="checkbox"/> <i>Phone interview completed</i> <input type="checkbox"/> <i>Home inspection completed</i> Signature of BTB Representative: _____ Signature of BTB Representative: _____
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