

AKITA RESCUE PROSPECTIVE ADOPTION QUESTIONNAIRE

So that we can be assured that the Akita you are applying to adopt will be best suited to your home and lifestyle and be placed in an environment that is compatible with its needs, we ask that you complete this questionnaire and return it to the address below.

NAME _____ HOME PHONE _____ WORK PHONE _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____

How long have you been at this address? _____ Are you planning to move soon? _____ Where? _____
Have you ever owned an Akita or other dog? _____ What breed? _____ If yes, what happened to the dog(s)? _____
Have you been a member of an Akita Club? _____ Where? _____
Why would you like to adopt an Akita: personal protection _____ to breed _____ as a pet for my children _____ as a companion for myself _____ to give as a gift _____ as a guard dog _____ to show _____ obedience work _____ other (please specify) _____
Who lives in your household? # of adults _____ # of children _____ ages of children _____ other pets (list species, breeds, ages, whether spayed or neutered) _____
Does anyone in your household have an allergy to dogs? _____
Which member(s) of your household will feed and care for the dog? _____
How long will your Akita be alone each day (in hours) _____
Do you live in: a house _____ apartment _____ condo _____ mobile home _____
Do you: own _____ rent _____ Landlord's name _____ phone _____
If you have a fenced yard, please describe: height _____ type _____ size of fenced area _____
Where will your Akita be during the day? House _____ yard _____ garage _____ other (specify) _____
Where will your Akita be during the night? House _____ yard _____ garage _____ other (specify) _____
How much do you anticipate spending each year to feed, vaccinate, license and provide medical care for your Akita?
\$50 _____ \$100 _____ \$200 _____ \$300 _____ \$400 or more _____
When you go away for a few days, who will care for your dog? _____
If you own a pick-up truck, will your Akita ride in the back? _____
Have you ever obedience trained an Akita? _____ A different breed? _____
Would you be willing to take your Akita to obedience classes? _____
Do you have a preference for: Male _____ Female _____ either _____ Age? _____
Will you spay/neuter your Akita? _____
Do you know that Akitas shed heavily approximately twice a year? _____
Veterinary reference: _____
Two other references (list phone numbers) _____
Are you aware that when you adopt an Akita, you are taking on the responsibility for its lifetime, which may be up to 12 years? _____

By signing below, I certify that the information I have given is true and any misrepresentation of facts may result in my losing my privilege of adopting an Akita.

Signature

Date

Return form to: Carol Harris, President Squaw Peak Akita Club
7341 W. Libby St.
Glendale, AZ 85308-8144
(602)547-9658

Check the club's website for current information on available dogs. www.akitaclubaz.com