



SHOW ME YOUR PITTIES RESCUE

California 501(c)(3) Nonprofit Animal Rescue
P.O. Box 141, Greenwood, CA 95635 | (530) 248-6969

ADOPTION APPLICATION

Thank you for your interest in adopting from Show Me Your Pitties Rescue. Your information will remain confidential and used only as part of the SMYPR adoption process. Please complete all sections as fully as possible — the more we know about your home and experience, the better we can match you with the right dog.

PERSONAL INFORMATION

Name: _____ Age: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Best time to reach you: _____
Preferred contact method: **Phone** **Text** **Email** *(select one)*

HOUSEHOLD INFORMATION

How many people live in your household?

Adults over 21 (including yourself): _____ Ages: _____
Children under 21: _____ Ages: _____

Type of home:

(select one) **HOUSE** **APARTMENT** **CONDO** **DUPLEX** **MOBILE HOME** **TOWNHOME**

Do you:

(select one) **OWN** **RENT** **LEASE**

How long have you lived at this address? _____

If renting or leasing, are there pet restrictions?

(select one) **YES** **NO**

If yes, please describe the restrictions: _____

YOUR HOME & YARD

Describe your yard:

(select one) **No yard** **Unfenced yard** **Partially fenced yard** **Completely fenced yard**

Height of fence: _____ Made of:

(select one) **Wood** **Chain link** **Brick** **Other:** _____

If no fully fenced yard, do you agree to keep your dog on leash at all times outside? **YES** **NO** *(select one)*



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YOUR CURRENT PETS

Please list all pets currently in your household. Attach an additional sheet if needed.

Dog / Cat / Other: _____ Breed: _____ Name: _____

Age: _____ M / F: _____ Altered? _____ How long owned? _____

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Dog / Cat / Other: _____ Breed: _____ Name: _____

Age: _____ M / F: _____ Altered? _____ How long owned? _____

We recommend that all animals in your home be up to date on vaccinations prior to adoption.

Who will be the primary caretaker of the dog? _____

YOUR EXPERIENCE WITH DOGS

How would you describe your level of experience? (Select all that apply)

- Never had a dog
- Had a childhood pet dog
- Had one or more dogs as an adult
- Experience with powerful or large breeds
- Experience managing ongoing medical needs in a personal dog
- Experience working at a boarding kennel, resort, or pet sitting service
- Experience working with behavioral issues in a personal dog
- Experience working in a veterinary hospital
- Am a professional dog trainer

Previous adoption or rescue experience? If yes, please describe:

Do you have experience with: (Select all that apply)

- Small dogs
- Medium dogs
- Large dogs



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Specific breeds you have experience with:

ADOPTION PREFERENCES

What type of dog are you looking to adopt? (Select all that apply)

- Adult dog
- Puppy (under 1 year)
- Senior dog (7+ years)
- Dog with special medical needs
- Dog with behavioral challenges (with support)
- Pit Bull / Bully breeds (all SMYPR dogs)

Do you have any preferences for the dog you adopt?

Size preference? **YES** **NO** (*select one*)

If yes, preferred size: _____

Breed preference? **YES** **NO** (*select one*)

If yes, preferred breed(s): _____

Age preference? **YES** **NO** (*select one*)

If yes, preferred age range: _____

Gender preference? **YES** **NO** (*select one*)

If yes, preferred gender: _____

DAILY CARE & ROUTINE

Hours per day the dog will spend WITHOUT a human present: _____

Where will the dog be when someone is home? _____

Where will the dog be when left alone? _____

Where will the dog sleep at night? _____



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CHALLENGES & CONSIDERATIONS

Please be honest — this helps us find the right match. Select all that apply.

- Excessive barking
- High activity level, destructive chewing, digging, or escape attempts
- Not housetrained
- Leash hesitant or reactive on leash
- Not crate trained
- Requires vet visits or at-home medication administration
- Resource guarding (food, toys, furniture, or bed)
- Shy, timid, fearful, or undersocialized
- Unsure around or anxious with children
- Not good with or unsure around other dogs
- Not good with or unsure around small animals or cats
- Senior, deaf, or blind dog

SOCIAL MEDIA

Please share your social media handles below. SMYPR may follow your adoption journey and share updates with our community. This information is optional but greatly appreciated.

Instagram: @ _____ Facebook: _____

X (Twitter): @ _____ TikTok: @ _____

ADDITIONAL INFORMATION

Please tell us anything else you would like us to know to help us find the right match:

WHAT TO EXPECT FROM SMYPR

- SMYPR will inform you to the best of our knowledge of the dog's age, health, breed, and behavior prior to adoption.
- All SMYPR dogs receive a thorough veterinary exam, updated vaccines, fecal test, deworming, flea treatment, and microchip prior to placement.
- You will be contacted by a SMYPR representative to schedule a meet-and-greet and, if applicable, an in-home visit.
- Submitting this application does not guarantee adoption. SMYPR reserves the right to approve or decline any application in the best interest of the dog's welfare.
- If your application is approved, you will be asked to sign a Dog Adoption Agreement and pay the adoption donation prior to taking the dog home.



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ADOPTION TERMS & CONDITIONS

By signing below, the adoption applicant agrees to and understands the following:

1. I have read and understand the statements above. I certify that all information contained in this application is true, complete, and correct.
2. I understand that although SMYPR takes responsible steps to screen animals for adoption, it makes no guarantees relating to the animals' health, behavior, or actions.
3. I understand that submitting this application does not obligate SMYPR to approve my adoption request, and that SMYPR reserves the right to decline any application at its sole discretion.
4. I agree that if my application is approved and I adopt a dog from SMYPR, I will provide that dog with proper food, shelter, veterinary care, and a safe and loving permanent home.
5. I agree that I will never surrender a dog adopted from SMYPR to any shelter, pound, or third party without first contacting SMYPR. If I am unable to keep the dog for any reason, I agree to return the dog to SMYPR.
6. Misrepresentation & Right of Recall: I understand and agree that if SMYPR determines at any time that I have provided false or materially misleading information in this application — including but not limited to my living situation, household composition, existing pets, or experience with animals — or if SMYPR determines that the placement is not in the best interest of the dog's health, safety, or welfare, SMYPR reserves the right to reclaim the dog immediately and without advance notice. I agree to return the dog to SMYPR upon demand and waive any claim to the animal from that point forward.
7. I agree to pay a non-refundable adoption donation of \$350 to SMYPR, which must be paid in full prior to taking the dog home.

SIGNATURES

Signature of Adoption Applicant: _____

Print Name: _____

Date: _____

Witnessed By: _____

Print Name: _____

Date: _____

RETURN COMPLETED APPLICATION TO

Email: showmeyourpittiesrescue@gmail.com

Gaelle Drey Bourhis, President | Show Me Your Pitties Rescue | Phone: **(707) 494-3473**