## Irish Wolfhound Rescue of the Mid South Adoption Application

http://www.iwams.org/rescue

Please complete all and include additional pages if necessary. Mail to: IWAMS Rescue Coordinator, 4220 Millpoint Dr, Wake Forest NC 27587 or email: <u>kbbmsw@gmail.com</u>



For more information, contact Kathy Boyd: cell # (919) 800-7939 or email: <u>kbbmsw@gmail.com</u>

This application is the first part of a two-step process to qualify potential adoption homes. Please fill it out as completely as possible, and add any other information to share regarding your household. When your application is received, you will be notified and your application reviewed. We will contact you with any concerns\*/\*\*, and if resolved, your home will be included in our available adoption homes. If your home is a good match for an Irish Wolfhound (IW) that becomes available, we will interview you further on the phone based on your application and a premise check will need to be completed. IWs are placed with best match for their background and needs.

\*Please note our rescue policy prohibits placement of an Irish Wolfhound (IW) in a home without a securely fenced exercise area of an appropriate size for a giant breed and sighthound. This does not include strands of electric fence, invisible fence, 3'-3.5' picket fencing, regular split rail fence without a lining of livestock wire fencing, or an enclosed area that counts on a natural barrier such as a stream, river, lakefront, canal, seawall, bushes, etc.

\*\*Homes that don't provide annual health checkups and Veterinary care for their pets cannot be considered.
\*\*\* Adoptive hounds are not intended for breeding purposes. Hounds are not to be sterilized until they are at least 2 years old.

\*\*\*\* Adoptive families are to join IWAMS as an Associate if not already a member and complete three training classes within one year of completing adoption contract.

Personal	Information

Names(s):		Date:	
Address:	City:	_State:	_Zip:
Home Phone:	Cell Phone:		
E-mail:			
Occupation (1):	_Employer:		
Phone:			
Occupation (2):	_Employer:		
Phone (optional):			
Residence: House Apartment Mobile home	Condo Other:		
Do you own?: Yes No Do you rent?: Yes	No Other:		
Landlord's Name:	Phone #:		
Landlord's Address:			
How long have you lived at this address? Month(s)	Year(s)		

Age(s) of children that the hound will have contact with:		
What are the municipal limits for the number of dogs a homeowner may own in your area?:		
Have you ever had to return a dog to a shelter, breeder or rescue?: Yes No Other:		
Describe the circumstances:		
Has anyone in your household been convicted of animal cruelty, or animal ordinance violations?: Yes No		
Who in your family wants a wolfhound?:		
Who will have primary responsibility and care for it?:		
Are there members of your family who have allergies?: Yes No		
Will you agree to join IWAMS?: Yes No		
Do you provide annual veterinary care and checkups for your pets? Yes No		
Have you adopted a dog(s) within the last 6 months?: Yes No		
Do you plan to adopt or foster another dog(s) within the next 6 months?: Yes No		
References Personal References - please list name, address, phone number(s) and email address (if available): 1		
2		
3		
Primary Veterinarian – please list name, address and phone number:		
Other references:		
General Have you had an Irish Wolfhound (IW) before? Yes No		
List the breeds of dogs you have owned in the past:		

If you no longer have them, please explain what happened to them:		
Do you have cats?: Yes No Do you have poultry or livestock?: Yes	No	
List all current pets you have, age, sex and if spayed or neutered:		
Where would you keep an IW when you are home?:		
Where would you keep an IW when you are at work or away?:		
Where would the IW sleep at night?:		
Maximum hours the IW would be left alone in a 24 hour period?:		
Describe your yard - is it fenced?: Yes No 3' Fence 4' Fence	_5' Fence	
Other fencing:		
What type of fencing? Chain link Wooden Vinyl Split Rail Li	ivestock Wire	
Other:		
How, how often, and where will your IW be exercised?:		
Have you ever completed a dog obedience class or otherwise trained dogs?:	_Yes No	
Do you agree to return the IW to IW Rescue if you are unable to keep it?:Ye	es No	
May a member of Rescue visit your home and check the references you provide	ed?: Yes No	
<u>Preferences</u> Describe what are you looking for in an IW?:		
Would you consider a: Male FemalePuppy Over 5 years Mi	ix <sup>#</sup>	
Signature:	Date:	
IWAMS Signature:	Date:	
Kathy Boyd / IWAMS Rescue Coordinator		

<sup>#</sup>IWRMS does not manage adoptions of wolfhound mixes. IWRMS will notify interested potential adopters if IWRMS is made aware of a wolfhound mix.