## Adoption Application

NAME:
ADDRESS:
CITY:
HOME PHONE:WORK PHONE:
EMAIL ADDRESS:
BEST TIME TO CALL:OCCUPATION
DO YOU OWN OR RENT YOUR HOME?OWNRENT
If you rent, do you have landlord's permission to keep a dog?NO
Name of landlordPhone number
Do you live in ahouseapartmenttrailerother
How long have you lived at this address?
Do you have a completely fenced yard suitable for a dog?
Do you have a kennel run?YesNo
Describe the fence or kennel run type, height, and size
If no fence or kennel run, how will you handle terrier's exercise and toilet needs?
Do you have a suitable dog crate?yesno
How many adults in the household?Children?
Age and gender of children?
Are any members of your household allergic to animals?YesNo
How many hours a day must the terrier be home alone?
Are there other visitors to your home, human or animal, with which a new dog will have to interact?

Please describe lifestyle	active	passive	
How many dogs have you own	ned in the last 5 yea	rs?	
If you do not still own the dog specific			
Have you owned a Jack Russe			
Why did you choose this breed			
What activities do you plan wi			
petguard	huntingobe	edience	_attend JRTCA trials
Other			
Do you intend to keep this dog	g primarily	_indoors	outdoors
Where will the dog sleep?			
Do you have a regular veterina	arian?yes	no	
Doctor's name			
Do you want to adopt ama Age preference	lefemaleno	preference,	
I would be willing to consider	a dog of a different	sex_	age
Personal reference:			
NamePhone		elationship	
Thank you!			