



## ISCM APPLICATION FOR ADOPTION OF A RESCUE DOG

Thank you for your interest in adopting an Irish Setter. In order for us to find the best match for you and our rescue dogs we ask that you fill out the following application as accurately and honestly as possible. When you have completed the form, please copy and paste it into an email and return it to [butternutck@chartermi.net](mailto:butternutck@chartermi.net) or print mail to: Dan & Ann Graham, 6206 Scott Road, Mount Morris, MI 48458

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: daytime: \_\_\_\_\_ evening: \_\_\_\_\_

E-mail: \_\_\_\_\_

Please list the members of your household, with ages: \_\_\_\_\_

\_\_\_\_\_

Who will be primarily responsible for the care of the dog? \_\_\_\_\_

Where will the dog live during the day? \_\_\_\_\_ at night? \_\_\_\_\_

Will the dog have the run of the house, be blocked off parts of the house, use a crate, be tied outside, or live in the yard? Please explain:

\_\_\_\_\_

\_\_\_\_\_

Please list other pets, ages and if they are spayed or neutered? \_\_\_\_\_

\_\_\_\_\_

Have you ever bred dogs? \_\_\_\_\_ Do you plan to? \_\_\_\_\_

Have you ever crate trained a dog? \_\_\_\_\_

Have you ever obedience trained a dog? \_\_\_\_\_

\_\_\_\_\_

Would you be willing to take an obedience course with your dog? \_\_\_\_\_

Is your residence: House \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_ Are pets allowed? \_\_\_\_\_

Urban \_\_\_\_\_ Suburb \_\_\_\_\_ Rural \_\_\_\_\_ Do you: own \_\_\_\_\_ rent \_\_\_\_\_ Do you have a yard? \_\_\_\_\_

Is it fenced? \_\_\_\_\_ Type of fencing? \_\_\_\_\_ How high? \_\_\_\_\_

If fenced, is the entire yard fenced, or just a portion? \_\_\_\_\_

Is someone home during the day? \_\_\_\_\_ If not, how long will the dog be alone (average)? \_\_\_\_\_

What is the role you see a dog having in your life?

Pet/Companion \_\_\_\_\_ Obedience \_\_\_\_\_ Agility \_\_\_\_\_ Therapy work \_\_\_\_\_ Field/Hunting \_\_\_\_\_

Other (please specify) \_\_\_\_\_

Have you had dogs in the past? If yes, how many? \_\_\_\_\_ What breeds? \_\_\_\_\_

What happened to them? \_\_\_\_\_

If you were unable to keep them, why? \_\_\_\_\_

How far are you willing to drive, in hours, to look at a dog? \_\_\_\_\_

Would you consider a special needs dog? \_\_\_\_\_  
(such as one that requires daily medication, one who needs obedience training, an older dog)

Are you familiar with the costs of veterinary care? \_\_\_\_\_ Licensing requirements? \_\_\_\_\_

Vaccinations and heartworm preventative? \_\_\_\_\_

Name, address and telephone number of your veterinarian: \_\_\_\_\_

Are you aware of the grooming requirements of an Irish Setter? \_\_\_\_\_

Will you groom the dog yourself or use a groomer? \_\_\_\_\_

Do you prefer: male \_\_\_\_\_ female \_\_\_\_\_ either \_\_\_\_\_

Do you have a preference as to age? \_\_\_\_\_ If so, what age range will you consider? \_\_\_\_\_

Do you have a preference as to the type of Irish Setter? \_\_\_\_\_ Do you prefer: Bench \_\_\_\_\_ Field \_\_\_\_\_

**On a separate page, please write a brief description of you and your family. Include any special activities the dog would be involved in, or special requirements you have. Also, please tell us why you want to adopt an Irish Setter.**

I certify that the above information is true and I understand that prior to the placement of an Irish Setter in my home the above information will be verified. I also agree to a personal interview with a member of the Irish Setter Club of Michigan if requested to determine the suitability of my facilities to care for an Irish Setter.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_