

Adoption Application Form



Thank you for your expression of interest in adopting a retired greyhound. In order to ensure complete compatibility with your intended companion, we request your cooperation with the following questionnaire.

Please post to:

Greyhound Adoption Program
PO Box 785
Seymour VIC 3661

Surname: First Name:

Address:

Suburb: Post Code: State:

Phone: (H) (W) (M)

Email:

Age Group: 15-20yrs 21-30yrs 31-50yrs 51yrs+

Are there children living with you? Yes No

If yes, what age(s)? 0-2yrs 3-5yrs 6-10yrs 11yrs+

Type of residence: Caravan Flat House Other

Do you own or rent? Own Rent

If renting, do you have permission to own pets? Yes No

Do you have a fenced yard? Yes No

Will your greyhound be sleeping inside at night? Yes No

If no, what kenneling/accommodation would be available for your greyhound?

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Please list pets currently in your home, including small caged pets and farm animals:

Animal	Age	Sex	Desexed	Size	Age	Sex	Desexed	Size	
<input type="checkbox"/> Dog	<input type="checkbox"/>	<input type="checkbox"/> M/F	<input type="checkbox"/> Y/N	<input type="checkbox"/> S/M/L	2 nd Dog	<input type="checkbox"/>	<input type="checkbox"/> M/F	<input type="checkbox"/> Y/N	<input type="checkbox"/> S/M/L
3 rd Dog	<input type="checkbox"/>	<input type="checkbox"/> M/F	<input type="checkbox"/> Y/N	<input type="checkbox"/> S/M/L	4 th Dog	<input type="checkbox"/>	<input type="checkbox"/> M/F	<input type="checkbox"/> Y/N	<input type="checkbox"/> S/M/L

Animal	Qty	Animal	Qty	Animal	Qty	Animal	Qty
<input type="checkbox"/> Cat	<input type="checkbox"/>	<input type="checkbox"/> Livestock	<input type="checkbox"/>	<input type="checkbox"/> Poultry	<input type="checkbox"/>	<input type="checkbox"/> Other	<input type="checkbox"/>

If you have poultry or rabbits etc, are they caged or free range?

Caged Free Range Both

What is your reason for choosing a greyhound?

Your preferences:

Sex of dog: Male Female Either

Are you interested in adopting an older dog (6yrs plus)? Yes No

If no, what age/s? 1-2 years 3-5 years

Temperament (*tick all that apply*)

Independent Protective Very Active Sedate Active
 Affectionate Easy Going Outgoing Playful Shy

Will the greyhound be left alone during the day? Yes No

Are you interested in doing obedience training with your dog? Yes No

Please add any additional information that might assist us in selecting the right greyhound for you:

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How did you learn about GAP?

- Radio Paper TV Internet Friend/Family Member
 Greyhound Racing Victoria Promotional Events Other

For promotional events and other, please specify:

Upon receipt of your completed questionnaire, you will be placed in the waiting list for a greyhound. At times, for cat friendly dogs, the wait can be as long as six months. Your name will be added to our mail list and you will receive copies of Bulletins and Newsletters to help keep you informed about the GAP news and events. When a greyhound is available that will meet your requirements, you will be contacted and a meeting will be arranged.

Should you wish to discuss your application in more detail, please don't hesitate to contact the GAP Coordinator, Larissa Darragh, during office hours on (03) 5799 2909. Your inquiry is sincerely appreciated, and will be processed as quickly as possible.