



Application is for:  Long Term Foster  
 Adoption  
 Undecided

## Senior Dog Foster/Adoption Application

Thank you for applying to long term foster or adopt a senior dog through Marty's Place Senior Dog Sanctuary. Your application will be reviewed by our Foster and Adoption Program Coordinator whose mission it is to find the best pet for your family and the ideal lifelong loving home for our senior dogs. If the perfect match cannot be made at this time, we will keep your application on file.

For additional information, please contact: [morgan@martysplace.org](mailto:morgan@martysplace.org) or (609)259-1278.

### General Information:

Date					
Name					
Street Address					
City		State		Zip Code	
Home Phone			Cell Phone		
Email Address					
Driver's License #			State Issued		

\*\*\*If this application is for a specific dog, please enter the name here:

### Interest in a senior dog:

I am looking to adopt a dog (please check all that apply):

- As a companion for another pet.
- As a first-time pet owner.
- As an experienced dog owner.
- As a companion for my child(ren).
- Other:

Dogs available for adoption through Marty's Place are at least 7 years old and often older. Are you familiar with the needs and characteristics of senior dogs?

- Yes     No

Why do you want to adopt a senior dog?

Do you understand that as a dog ages, they may require medication, more frequent veterinarian visits, more bathroom breaks, and other concessions?

- Yes     No

Are you willing and able to provide this additional care if it is needed by your new companion?

- Yes     No

## Living arrangements:

### Who lives with you?

Name	Relationship	Age	Have they had a dog before?	Are they interested in fostering/adopting a senior dog?

Is anyone in your home allergic to animals?  Yes  No

If yes, please explain: \_\_\_\_\_

If you do not live with children, do children visit you often?  Yes  No

If yes, please complete the chart:

Name	Relationship	Age	Have they had a dog before?

I live in a(n)  single family home  multifamily home  apartment  condo/townhouse

mobile home  military housing  retirement community  other: \_\_\_\_\_

The area is  urban  suburban  rural

Do you own your home?  Yes  No

Do you rent your home?  Yes  No

Are there any breed restrictions in your homeowner's insurance policy, housing association or lease?  Yes  No

If yes, please explain: \_\_\_\_\_

If you rent, we will need to verify that you are permitted to have a dog.

Landlord's name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are there any restrictions regarding weight or the number of animals you may have in your lease:

If yes, please explain: \_\_\_\_\_

Are you planning to move within the next 6 months?  Yes  No

If yes, do you consent to a home visit in your new home?  Yes  No

**Describe the dog's living situation:**

- Dog will be a house pet and live inside with our family.
- Dog will live (primarily) in the basement or garage.
- Dog will live (primarily) outside.
- Dog will be a guard dog for a business or residence.
- Other, please explain: \_\_\_\_\_

**Describe your yard:**

- No yard
- Yard not fenced
- Fenced yard, height of fence: \_\_\_\_\_

**Marty's Place Foster dogs must always be supervised when outdoors.**

If you don't have a fenced yard, do you agree to keep your foster dog on leash at all time outside?  Yes  No

**Have you or do you currently have any pets? If so, complete the following and include all pets your family has had for the previous 10 years.**

Type (dog, cat, bird) & name of pet	Status (Living/Deceased)	Breed	Gender	Age	Spayed/Neutered	Veterinarian Name and Phone
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Do you have any experience training a dog?  Yes  No

If yes, please explain: \_\_\_\_\_

How did you learn your training techniques?  Self-taught  Friends/Family

Professional Trainer Name: \_\_\_\_\_

**Veterinarian (If applicable, please provide contact information for current and past veterinarians.)**

Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Company \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Who will be the primary caretaker of your foster dog? \_\_\_\_\_

Who will walk the dog? \_\_\_\_\_

Who will play with the dog?

How many hours a day will your dog be alone?

When the dog is home alone, he/she will be:

Crated  Tethered inside  Confined to a small area inside  Loose inside  Loose outside

Kenneled outside  Chained outside  Cable run  Other, please explain:

Where will the dog sleep?

## Specifications for New Dogs

Do you have a breed preference? If so, what type?

Do you have experience with this breed?  Yes  No

If yes, please elaborate:

Do you have a size preference? If so, what is the maximum size?

Do you have an age preference? If so, what is the age range you prefer?

**(Please note, while we accept dogs aged 7 years & older, the average age of our population is about 12 years)**

Do you prefer a male or female? Why?

Do you prefer that the dog is .... (Please check all that apply).

High Energy  Affectionate  Mellow  Quiet

Lap Dog  Easy Going  Playful  Protective  Other:

What do you prefer not to have? (Please check all that apply).

a dog that barks a lot  a dog that isn't animal friendly  a dog that sheds a lot or requires grooming

a dog that needs training  a dog that is independent  a dog that is dependent/seeks a lot of attention

Other:

## Previous Dog Ownership Experience:

Have you experienced any of the following: (Please check all that apply)

pet dying as a result of illness or old age

pet hit by car

pet given away or sold

pet stolen

never had any pets

pet lost (please explain how)

**References** (Please provide names and phone numbers for 2 references; friends, neighbors and co-workers, no relatives may be used.)

**Reference One:**

Name   
Relationship and For How Many Years   
Cell Phone  Home Phone

**Reference Two:**

Name   
Relationship and For How Many Years   
Cell Phone  Home Phone

**Certification of Information**

**By signing below:**

- I verify that all of the information I have provided in the Marty's Place adoption application is true and complete. My new dog will reside in my home as a pet. I will provide it with quality dog food, plenty of fresh water, indoor shelter, affection, annual physical examination and vaccinations under the supervision of a licensed Veterinarian. I understand that if I choose to adopt, rather than foster a senior dog, that the dog will eventually need extra medical care and attention that will increase my expenses.
- I understand and agree that falsification of any of the information contained herein is grounds to disqualify my foster or adoption application and nullify all foster or adoption(s) and/or foster or adoption agreements between the applicant(s) and Marty's Place Senior Dog Sanctuary.

Applicant's Name

Signature  Date: