



Greyhound Outreach, Inc. Adoption Application

If you are interested in adopting a greyhound, please fill out this application to the best of your abilities. Please return the completed form to:

Greyhound Outreach
PO Box 912
Oswego, New York 13126

If you have any questions, contact G.O. representatives Wendy (315) 882-3483 or Kim (315) 343-5164.

Name: [Mr.] _____ [Mrs.] _____

Date: _____

Phone: _____ Best Time Call: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Occupation: [Mr.] _____

Occupation: [Mrs.] _____

Age of Applicant(s): _____ Number of people living in household: _____

Adults: _____ Children: [How Many/Ages] _____

How did you hear about Greyhound Outreach? _____

Do you have a preference regarding: Male _____ Female _____ Age _____

Do you have a dog now? Breed/Sex/Age _____

Other Pets: _____

What Pets have you had in the past and what happened to them? _____

How long would your greyhound be alone per day? _____

Dwelling Type: Own _____ Rent _____ Lease _____

If you rent or lease your home, we are obligated to confirm with your landlord that a Greyhound would be permitted. If applicable, please provide:

Landlord Name _____ Address _____

City/State/Zip _____

Do you have a fenced yard? _____ Type Fence? _____ Height? _____

Approximate size of fenced area: _____ Is it totally enclosed/secure: _____

If you don't have a secured fenced area, are you willing to leash walk your greyhound 4-5 times a day for necessary functions and exercise? _____

Are there stairs that the greyhound will have to use? Yes _____ No _____ How Many? _____

Veterinarian's Information:

Name _____ Phone _____

Address _____

City/State/Zip _____

Personal or Business reference:

Name _____

Phone _____ Address _____

City/State/Zip _____

After we receive your application, you will be contacted to set up a home visit as soon as possible. If I adopt a greyhound, I give Greyhound Outreach permission to share my name, number and address with the Lost Dog Cooperative. I understand that my information will be kept confidential and will only be used by the L.D.C. in conjunction with Greyhound Outreach to help me find my greyhound if it were to get loose or go missing.

Signature _____ Date _____