



# NorCal Irish Setter Rescue, Inc.

## Adoption Form

Please complete the entire form. Sign it, then mail it to:  
Debra Dove, 957 Ordway Street, Albany, CA 94706-2142

After we receive your Adoption form we will contact you.

*The information gathered from the Adoption Form is for NCIS Rescue, Inc. purposes only and will not be released to outside agencies.*

<b>First Name:</b> _____	<b>Last Name:</b> _____	
<b>Phone:</b> _____	<b>Date:</b> _____	
<b>Address:</b> _____		
<b>City:</b> _____	<b>State:</b> _____	<b>Zip:</b> _____
<b>Email:</b> _____		
<b>Names and relationship of other adults in the household:</b> _____ _____		
<b>Names and ages of children:</b> _____ _____		
<b>Other pets owned:</b> _____		
<b>I live in a:</b> <input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Condo;	<b>Which I:</b> <input type="checkbox"/> Own <input type="checkbox"/> Rent	
<b>Is the yard fenced?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If "Yes", how high?</b> _____	<b>Do you have a pool?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>The dog will normally be:</b> <input type="checkbox"/> Inside <input type="checkbox"/> Outside		
<b>If "Outside", describe the shelter/space:</b> _____		
<b>Where will the dog sleep at night?</b> _____		
<b>Do all adult family members work?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Number of hours the dog will be left alone on a weekday:</b> _____		
<b>Have you ever owned an Irish Setter?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Or other dog?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>What happened to it?</b> _____		
<b>Veterinarian's Name:</b> _____	<b>Phone:</b> _____	
<b>Address:</b> _____	<b>City:</b> _____	<b>State:</b> _____
<b>I prefer a:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Age:</b> _____	

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

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For more information, call Debra Dove at (510) 524-2602