Application for Adoption of a Sighthound

I,	, owner/tenant of
herewith apply for permission to keep the (SRSA) on the premises:	he following Sighthound adopted from Sighthound Rescue SA
Colour: Age: Sex:	
I hereby agree to keep my pet in a resp adoption policy.	consible manner and to provide proper care as set out in the
·	scue Scheme will be sterilised if age-appropriate, microchipped theck will be conducted by a representative of the HWC.
Signature	 Date

reisonal details of applic	anı					
Full name:				 	 	
Home address:					· · · · · · · · · · · · · · · · · · ·	
Postal address:					· · · · · · · · · · · · · · · · · · ·	
Telephone numbers:						
Home: Cell (1): Email:		Work:				
			Cell (2):			
		ID:				
Occupation:			Work address:			
Your family						
How many adults in the fan	nily?					
How many children and age	es?					
Is there someone at home	during the d	ay?		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Specify:						
Your pets past and prese	nt					
How many dogs/cats have	vou owned	over the	past five vear	s?		
Dogs:	-		•			
What happened to the pets		ger have			_	
Details of dogs/cats you cu			·			
Details of dogs/outs you out	Toridy Own.					
Breed	Age	Sex	Sterilised?	Dewormed?	Inoculated?	
		-	Yes/No	How often?	How often?	
Other pets:			<u> </u>			
Do you think your current p	ets will adju	st to a th	ne dog you are	applying for?		
What brand of food do you	feed your a	nimals?				
-	-					
•		-				
Have you ever adopted an						
Why do you want a dog:				· 		
	er doa?		•	Hunting/racing	1?	
•	3		•	Personal protection?		
·			•	Breeding? HWC does not allow		
•				_		
_						
Have you ever sent a dog to Have you ever had a pet eu f yes, please explain: Have you ever adopted an	o a shelter outhanised? _	or given	a dog away? _	When? Hunting/racing Personal prote	g? ection? /C does not	

What made you decide on a Whippet as your choice for a pet dog?

Is the Sighthound for yourself?								
Can you afford private veterinary fees?								
Details of your vet:								
							If outdoors during the day, what kind of	shelter will you provide?
							Kennels?	Verandah?
							• Garage?	
Other specify:								
Where will the dogs be kept at night? In	doors mandatory – not negotiable							
Who will look after your dogs when you	go away on holiday?							
If you move, will you take the dogs with	you?							
If no, please explain:								
Will you allow a representative to do a h	nome check?							
Will you take responsibility for the dog for the next 10 to 16 years? What provisions will you make for the dog should you become unable to care for it?								
						Your property Do you rent or own your residence?		
Type of dwelling?								
 House 	• Flat							
• Cluster	 Townhouse 							
 Cottage 	• Plot							
Other specify:								
How long have you stayed there?								
Full description of your fencing and gate	es (height and type):							
ls your yard open plan or divided?								
Do you have an area which is secure from	om gates opening to the road for when your dog is outside?							
Do you have a swimming pool?								
If so, is it enclosed or otherwise made s	rafe?							
Declaration								
I, the undersigned, hereby declare that $% \left(1\right) =\left(1\right) \left(1\right)$	the above information is correct and agree to pay the full							
adoption fee of R to Sighth	ound Rescue SA.							
Signature	Date							
Witness for SPSA								

Sighthound Rescue SA Adoption Policy

Please read this adoption policy carefully as it is an agreement between SRSA and the undersigned.

- 1. I declare that I am over the age of 18 years.
- 2. I will not chain/cage the animal and I understand that if it is found chained/caged, it will be removed from my care immediately.
- 3. I take note that it is against SRSA policy to dispose of an animal adopted from the SRSA Rescue Scheme by selling it or giving it away as a gift to a third party. If for any reason I am unable to keep the Sighthound, I will return it the the SRSA.
- 4. I will ensure that all inoculations and deworming are kept up to date, that rabies vaccinations are done every three years and, in case of injury or illness, I will provide qualified veterinary care.
- 5. After adoption, the costs of inoculations and deworming, as well as any other veterinary costs, become my responsibility.
- 6. I will notify SRSA immediately should the Sighthound die (in writing and the reason) or go missing.
- 7. I will not use or allow the Sighthound to be used for hunting or racing.
- 8. I will notify SRSA of any change of address and contact details.
- 9. I consent to the compulsory sterilisation of the Sighthound by the SRSA if age-appropriate. If the Sighthound is less than six months old, I agree to sterilise this Sighthound at six months of age and to supply veterinarian confirmation of this procedure to SRSA.
- 10. I will ensure that my Sighthound is properly and adequately fed and housed.
- 11. I will make proper boarding arrangements for the Sighthound when I go on holiday.
- 12. I will permit a rperesentative of the SRSA to visit my premises to perform checks on the Sighthound and the conditions in which it is kept.
- 13. I will allow SRSA to repossess the Sighthound without any refund if, in the opinion of SRSA, the terms of this agreement have not been adhered to in spirit and deed.
- 14. My property is adequately enclosed and at no time shall I knowingly allow my Sighthound to roam the streets.
- 15. I reserve the right to discuss the content of this agreement with an authorised member of SRSA should there be any unclarity.
- 16. I hereby declare that I accept and understand the adoption policy.

Name and surname	Signature
SRSA witness	Date
Sighthound	
Sex:	Age:
Colour:	Microchip:

Please do not hesitate to phone your contact person SRSA for advice. Any communication from you regarding the progress of your puppy is always greatly appreciated.

Special Sighthound collars and pyjama coats, which are required in winter, are available from Rosemary Smith on 016-366-4078 or smithvale@telkomsa.net.