



## Basset Hound Rescue League Adoption Application

Last Name: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ ZIP: \_\_\_\_\_  
Day phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_  
Email address \_\_\_\_\_

How did you hear about BHRL?

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### **TELL US ABOUT YOUR HOUSEHOLD:**

How many adults? \_\_\_\_ What kind of hours are worked?  
Will anyone be at home in the day? \_\_\_\_\_ at night? \_\_\_\_\_  
What are the ages and sex of any children?

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How do other family members feel about getting a Basset?

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Do you own \_\_\_\_ or rent \_\_\_\_ your home?  
Type of home? (Circle one)  
Single family Apartment Condo Other \_\_\_\_\_

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Is anyone in the house allergic to dogs?

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### **TELL US ABOUT OTHER PETS:**

Do you presently own any other animals? Please tell us what type, the breed, sex, how long you have had the animal and if it is altered.

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Have you ever owned a dog before? \_\_\_\_\_ a Basset? \_\_\_\_\_  
Have you ever taken a dog to a basic obedience course?  
Did you pass?  
If not, what happened?

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Have you ever had a dog euthanized (put to sleep)?  
Why?

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### **WHY A BASSET HOUND?**

Why would you like to have a Basset in the family?

What do you like about Bassets?

What do you dislike about Bassets?

Have you read any books about Basset Hounds or dogs in general? Which ones?

**THE BASSET'S LIFE:**

Do you have a fenced area or yard for the dog?

Please describe the fence, and give approximate dimensions (height of fence, size of area enclosed).

If you do not have a fenced area for the dog, what arrangements will be made for the dog's exercise and toilet duties?

Are you willing to house-train a dog, if necessary?

Where will the dog be kept during the day?

At night?

When you are away from home?

Name of your veterinarian?

Phone Number and Address of veterinarian: \_\_\_\_\_

May we contact your vet for a reference? \_\_\_\_\_

May we have a personal reference, preferably another dog owner?

Name

Phone

**All the information I have provided on this application is, to the best of my knowledge, true and complete. I understand that falsifying answers on this application, or at any other time during the application process disqualifies me from adoption.**

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

Please return this completed and signed application to:

**BHRL**

**P.O. Box 44201**

**Fort Washington, MD 20749**



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Date of interview \_\_\_\_\_ Approved by \_\_\_\_\_

Comments

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