



Adopter/Foster Profile

BEFORE COMPLETING THIS FORM: You must **save a blank copy to your desktop** and **then close your web browser**.

Double-click on the saved file to open it with [Adobe Reader](#); enter your information; and save when done.

If you do not follow these steps, your information will NOT be saved.

1. Contact Information

First Name:

Last Name:

Street Address:

City:

State:

Zip Code:

Mobile Phone:

Home Phone:

Work Phone:

Email:

Other Phone:

2. Veterinary Information & References*

BRSM requires a veterinary reference; please list the contact information for your veterinarian below. If you have used this practice for fewer than 2 years, list your previous veterinarian as well. If you have never owned a dog, list the names, addresses and phone numbers of two persons who have seen you interact with a dog.

Veterinarian or
reference:

Phone:

Street Address:

City:

State:

Zip Code:

Comments:

Veterinarian or
reference:

Phone:

Street Address:

City:

State:

Zip Code:

Comments:

a) Are all your dogs (and cats, if any) current on vaccinations?

Yes

No

b) Do all your dogs receive heartworm preventatives?

Yes

No

What brand?

3. Beagle Experience & Pet History

a) Reason for wanting a beagle?

*By submitting this information, you authorize BRSM to check your references.

Beagle Experience & Pet History (continued)

- b) Will the dog be a house pet? Yes No Undecided
- c) Will you use the dog for hunting? Yes No Undecided
- d) Previously owned a beagle? Yes No
- e) What other breeds have you owned?
- f) Please list all pets owned in the last 10 years.

	Pet's Name	Dog/Cat/Other	Breed	Age	What happened to him/her?
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Comments:

- g) What are the requirements of dog ownership in your community? (e.g., licensing, vaccinations, leash laws, number of dogs you may legally have, etc.)

- h) Under what circumstances would you give up a dog?

4. Your Household

- a) List all family members, especially children. Please be sure to **include yourself** and anyone living in the home where the dog will live, including regular daily or overnight visitors.

	Name	Birth Date	Gender	Relationship to Adopter?
1.				
2.				
3.				
4.				

- | Name | Birth Date | Gender | Relationship to Adopter? | |
|------|---|---------------------------------|--------------------------|--------------------------|
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| b) | Does anyone in your family have animal-related allergies? If yes, please explain. | | Yes | No |
| c) | Tell us about your home: | | Condo/apartment | Townhouse |
| | Other — please describe: | | | Single family |
| d) | Do you? | Own | Rent | Other — please describe: |
| e) | Your occupation? | Spouse or partner's occupation? | | |
| f) | To properly care for a dog, what do you believe is a realistic annual cost? Consider food, pet-sitting, veterinarian, toys, bedding, and other potential costs. Please explain. | | | |

5. Hound Knowledge & Commitment

- | | | | | |
|----|--|-----|----|-----------|
| a) | Will you let the dog off-lead when walking? | Yes | No | Undecided |
| b) | Are you aware beagles will run away if let off-lead? | Yes | No | Undecided |
| c) | Are you aware rescue dogs need time to adjust to a new home? | Yes | No | Undecided |
| d) | Are you prepared to spend time housetraining? | Yes | No | Undecided |
| e) | Describe the method of housetraining will you use: | | | |
| f) | How have you educated yourself about the beagle breed? Please explain. | | | |
| g) | Describe the types of dog behavior you consider unacceptable. | | | |
| h) | Will you do obedience training? | Yes | No | Undecided |

Finally...The Dog!

e) Do you want your dog to have a certain look? Color? Size? Are you open to looks but want a certain personality? Describe the physical characteristics of the dog you are seeking.

f) Is there any other information you would like us to know?

8. Home Visit

a) Would you be willing to let us visit your home? Yes No

BRSM's goal is to place dogs in well-matched homes where they will be safe, loved, and treated as family members for the next 10 to 15 years. During home visits, BRSM volunteers simply look for things that beagles notoriously find interesting: fence holes/gaps, trash cans, piles of laundry (dirty or clean!), etc. We might even suggest hiding great grandma's antique leather footstool, and we offer advice on the "beagle bolt" which can happen in the blink of an eye.

b) Are you interested in volunteering to help us with home visits for other potential adopters? Yes No

c) If yes, what area would you be willing to help with?

9. Declarations

a) Do you agree to return your adopted dog to BRSM should you longer be able to keep or care for the dog in the future? Yes

b) I understand that this application will become part of the adoption contract if I am approved. Yes

c) I certify that that the information I have provided is true and correct and that I have the financial means and physical abilities to care for a dog. Yes

*To submit your profile, please **save the completed form**, attach the file to an email and send it to profile@beaglemaryland.org; a volunteer will be in touch within 5 days.*

Mobile device and Mac users: *if given the option, please select **Share Flattened Copy** when attaching your completed profile to an email.*