

WISEGUYS ITALIAN GREYHOUND RESCUE
VOLUNTEER APPLICATION

Section 1

Date:
Name:
E-mail address:
Telephone:
Street:
City:
State:
Zip:
Work Telephone: (if applicable)

Section 2

Please list pets you now have in your home:

Do you currently have pets?

Yes No

If yes, please fill out the following information

Type/Breed	Gender	Spay/Neut.	Age	Owned Since:
	Male Female	Spay Neut.		
	Male Female	Spay Neut.		
	Male Female	Spay Neut.		
	Male Female	Spay Neut.		

Comments (please note anything you feel WIGR should know)

***WIGR Policy is that we will not adopt/foster out to a home with any unaltered animals. The only exception is a dog in the home that is a currently being shown for it's championship or if the dog cannot be altered due to medical problems (veterinarian note required).**

Would your pets accept a new dog into the household?

Yes No

If you now have a pet(s), is it up-to-date on its vaccinations?

Yes No

Veterinarian: (Required)

Veterinarian's Name, Clinic Name, address, Phone number, Email address if available

References: (Required)

Reference 1

Name:

Street Address:

City:

State:

Zip:

Phone Number:

Email Address:

Relationship to you:

Reference 2 (Non Relative Reference)

Name:

Street Address:

City

State

Zip

Phone Number

Email Address

Relationship to you

Reference 3 (Non Relative Reference)

Name:

Street Address:

City

State

Zip

Phone Number

Email Address

Relationship to you

Do you:

Own or rent ?

House Apartment Condo?

If renting, please give landlord's name, address, and telephone number. We require the landlord's written consent for your having a dog. Please mail this consent to us. Application cannot be processed without written consent.

Landlord's Name:

Street:

City:

State:

Zip:

Tel.:

WIGR has a total restraint policy. Do you have a securely fenced yard?

Yes No

How high?

If not, are you willing to fence, install a pen or run, or leash walk at all times?

Yes No

Please specify

How many adults in your household?

Children?

Ages of children:

Do you have much contact with grandchildren or neighborhood/other children?

Yes No

What are the working hours of the adults in the house?

Does anyone in the house have allergies?

Yes No

Please describe the activity level of the house - busy in and out a lot, or is it a more quiet, structured atmosphere?

Where will the dog be kept during the day?

Where will it sleep at night?

Where will it be kept when left alone?

Where and how will the dog be exercised?

How many hours per day will the dog be left alone?

Italian greyhounds vary greatly in temperament, personality, and activity level. What characteristics would you find undesirable in a foster Italian greyhounds

Would you accept a dog that is older? Yes No ;
has been abused? Yes No
is not reliable with children? Yes No;
has a physical handicap? Yes No ;
is pregnant and will be whelping? Yes No ;
is recovering from medical treatment and may need foster care for 2 to 4 months?
Yes No .

Please describe any experience you may have had in training and/or rehabilitation work with dogs.

Some rescue Italian Greyhounds have problems with separation anxiety, fearfulness or houstraining. Would you be willing to help retrain a dog following a specific behavioral remediation program that included support from a trained professional? Yes No

If necessary, would you be willing to take a foster dog to obedience training (at WIGR's expense) or to obedience train him yourself? Yes No

Are you currently a member of a rescue organization? Yes No
Please list the group(s).

Please list any organizations you've been involved with in rescue or breed.

Please list groups you currently foster for or have fostered for:

As a foster home I understand that while in foster care of a WIGR dog I will provide shelter, food and security and that *only those medical procedures that are approved by WIGR* will be paid for by them. Anything else, such as heartworm medication, flea treatment, grooming, nail clipping, training or boarding will be absorbed by me unless

prior contact with a Board member for approval of reimbursement has been done.

I am aware that WIGR dogs may have undetectable illnesses and WIGR is responsible only for the medical care of WIGR dogs. I also realize that WIGR is not aware of the temperament or history of the dog in many cases and therefore realize that I am responsible for taking extreme care and precautions when bringing in a foster dog. Therefore, I understand that any medical issue or injury that occurs as a result of my negligence will be covered by me. I am fully responsible for the well being of the foster dog until it is officially adopted.

I will contact a WIGR representative immediately should the fostered WIGR dog become lost, stolen, seriously ill or die. Contact means verbal communication between a WIGR board member, and/or a representative thereof, either by telephone or in person.

The fostered WIGR dog will wear an ID and rabies tag at all times. (Foster homes can create a temporary tag or if a WIGR tag is available it will be supplied)

I understand that should I decide to permanently adopt a WIGR foster dog in my care, I will pay WIGR the required adoption fee that has been determined for this dog. I will notify the representative or a Board member that I wish to adopt the foster dog in my care and I agree to pay this fee and return it with a signed adoption contract immediately.

By signing below, I agree to release and covenant to hold harmless WIGR and its members from any claims, damages, costs, or actions incurred as a result of the foster care or actions of the foster dog. I will notify WIGR immediately should the foster dog become lost, stolen, seriously ill or die. The foster dog will wear a WIGR ID tag at all times. I understand that should I decide to permanently adopt the WIGR foster dog in my care, I will pay WIGR the current adoption fee to help defray the costs of spaying, neutering, shots, and other medical expenses that have been incurred by WIGR.

I certify that I am at least 21 years of age and that I will be solely responsible for the care and well-being of any dog that I foster care for WIGR. Any misrepresentation of the true facts in this foster home application will invalidate the foster home agreement and will give WIGR the right to immediately reclaim the foster dog.

My signature

Date: