



NorthEast Ohio Collie Rescue Inc.

PO Box 1594 • Elyria, Ohio 44036-1594

Phone • (216) 213-6197 • www.neocr.org

Placement Application

The answers you give on this application will help us to find the best possible match between you and an available Collie. Please fill out the form completely.

Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Preferred phone: _____ Alternate phone: _____

Best time to call: _____ Occupation: _____

Email address: _____

Do you own _____ or Rent _____ your home? (✓ Check one)

If you rent your home, would the landlord be willing to give written permission for you to own a dog? Yes No

Have you ever owned a Collie before? _____

If not, why did you choose this breed? _____

Sex preference (✓ Check one): Male Female No Preference

Color preference: Sable/White Tri-Color Blue Merle White

Age preference: _____

Would you be willing to consider a suitable dog of a different:

(✓ Check all that apply) Sex Color Age

List all plans or goals for this dog (i.e. pet, protection, obedience work, etc.):

Would you be willing to provide a home for a Collie with special needs due to age or physical impairment? Yes No Maybe

Does everyone in your household agree to adopt a Collie? Yes No

Who in the family will have the responsibility of caring for the dog?

Is anyone in your family allergic to pet hair or dander? Yes No

How many adults in your household? _____ How many children? _____

List ages and sex of children: _____

Do you own other dogs? Yes No If yes, how many? _____

Breed	Sex	Age	Breed	Sex	Age
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Are they spayed or neutered? _____

List any other animals you own: _____

What is the name of your current veterinarian? _____

Address: _____

City, State, Zip: _____ Phone No.: _____

Do you have a fenced in back yard with a gate? Yes No

If yes, specify the type of fence, height, and size of fenced in area:

If no, what arrangements will be made for the dog's exercise and toilet duties?

Please describe the last dog you owned and what happened to it?

If the dog died, please explain the circumstances:

Where will the dog spend the day? _____

Where will the dog spend the night? _____

Do you understand and accept that this dog must be spayed or neutered?

Yes No

Would you be willing to allow a representative of our placement group visit your home by appointment? Yes No If no, why not?

Comments: _____

Terms and Conditions of Adoption

I/We affirm that all of the above information is true and complete and further agree that:

Should an intact dog be placed with me, I/we agree to have it spayed or neutered within 30 days of adoption or by a date mutually agreed upon by myself and a representative of NorthEast Ohio Collie Rescue.

This dog will reside in my home as a pet. **I/WE UNDERSTAND THAT UNDER NO CIRCUMSTANCES IS THE DOG TO BE KEPT OUTSIDE AS A YARD DOG.**

I/We will provide it with adequate food, water, shelter, affection, and medical care.

I/We further agree not to sell, trade, or otherwise dispose of this dog, but to return the dog to a representative of NorthEast Ohio Collie Rescue, if at any time I/we are unable to keep this dog.

I/We understand that neither NorthEast Ohio Collie Rescue nor its representatives are responsible for the accuracy of the information received about the temperament, habits, or physical condition of the dog available for adoption. I/We understand that it is our responsibility to see and evaluate the dog myself before agreeing to adopt it.

Neither NorthEast Ohio Collie Rescue nor any of its representatives are liable or responsible for any damage, accident, or injury incurred during the initial examination of a dog, or from the placement of the dog in my household.

We reserve the right to follow up on the adoption in order to protect the welfare of the placed dog.

If the terms and conditions of this agreement are not upheld by the adopter, or if any misrepresentations have been made, we reserve the right to terminate this agreement and regain custody of the dog from the adopter.

I/We understand and agree to the terms and conditions of adoption.

Applicant's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Return to: **NorthEast Ohio Collie Rescue Inc.**
PO Box 1594
Elyria, OH 44036-1594

Or [click here](#) to email a filled-in version of this application to: adoptions@neocr.org.

