

St Giles Animal Welfare Ltd Non- for - profit based at St Giles Animal Centre, Wrantage, Taunton. TA3 6DJ  
Tel: 01823 490333 – email: [foster@sgaw.co.uk](mailto:foster@sgaw.co.uk)

**If you want to adopt or foster a dog or puppy from St Giles we need to get some details from you so we can find the perfect animal for you. Please answer honestly so we find the right match.**

### Your Details

Title, first name & surname .....

Address.....

..... Post code .....

Email: ..... Tel: .....

### Where did you hear about us?

- Advertisement  Website  Face book  Already aware of us  Referred by another establishment  Just passing
- Word of mouth  Other (please state): .....

### Are you interested in Fostering ?

Size of Dog:  Small (terrier)  Medium (staffie)  Large (Labrador)  Any size

Age of dog:  Puppy  Less than 2 yrs.  2 – 5 yrs.  5 – 8 yrs.  8 yrs.  Any age

Gender of dog:  Male  Female  Either

have you see a dog/puppy on our website/Facebook that you are interested in? Name of dog .....

### Information about your home

Do you:  Own your home  Rent (if you rent, have you got written permission from your landlord  Yes  No

If no you will need to provide proof before any adoption can take place.

Do you have a garden:  Yes  No  Communal Is the garden secure from escape:  Yes  No  Not sure -

Please provide details of provisions to prevent escape (eg: escape – proof fencing, won't be let out unsupervised):

.....

### Information about your family

Who lives at home: ..... Adults - Ages 16 – 25  25 – 45  45 – 60  60 – 75  75 plus

Children – Ages .....Any children visiting:  Yes  No If yes, ages: .....

Frequency of visits:  Daily  Weekly  Monthly  Annually

Do you own any other dogs:  Yes  No If yes, state gender & age .....

How long have they been in your care?..... Are they neutered:  Yes  No

Have they been vaccinated within the last year:  Yes  No Do you own any other pets:  Yes  No

If yes please state what and age: .....

### Information about your lifestyle

How much daily exercise do you expect to give the dog: Weekdays: .....hours Weekends .....hours

How active are you:  Vey  Reasonably  Not very

How long do you expect to leave the dog alone on a regular basis: ..... hours

Is this:  Daytime  Evening  Night time

How often: .....

Are you planning any of the following:  Moving house  Holiday in the next few weeks

**Your ideal dog would:**

	Very Important	Quite Important	Not Important		Very Important	Quite Important	Not Important
Be good with cats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Like other dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Be good with livestock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Like strangers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Be housetrained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Like traveling in the car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Be comfortable Around children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enjoy being picked up / petted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Your experience:**

- I need a dog that has already been trained:
- I have trained pet dogs before:
- I am an experienced owner and could train a difficult dog:

- I am a first time dog foster:
- What breeds have you had in the past?

**Signature:** .....

- I would enjoying training a dog:

**Date:** .....

**Whilst every care is taken to find the right dog for you , we cannot guarantee behaviour**

All personal information supplied by you on this application form will be processed by St Giles Animal Welfare Ltd, whose privacy policy is available on request. This applies whether the information is supplied directly to St Giles Animal Welfare Ltd as data controller or shared by us as a joint data controller with other animal welfare charities.

**You have chosen to take the next step in the process of giving a new home to one or more of our animals. The following questions are specifically aimed to provide more information to further help St Giles Animal Welfare staff and volunteers with the 'Perfect Match' process and will be given to the Home Visitor to assist with your application.**

**Your Home**

How long have you been resident at your current address: .....

**Your Family & Pets**

Name and area of the Veterinary Practice you use/last used: .....

Please sign to authorise us to contact your vet:..... Date:.....

Are you prepared and in a financial position to seek veterinary advice on routine vaccinations, worming, flea control and to over those unexpected costs regarding your new pet's health: Yes  No I am unfamiliar with these costs

**Identification & Proof of Current Address**

At adoption, St Giles Animal welfare will require you to show official proof of ID and current address

Please indicate which form you are able to provide:  Driving licence with photo  Current passport

Other (please state): .....

I agree to the Data Protection Act 2018 and I am happy for St Giles Animal Centre to hold my data: Signature:.....

