



## Warrior Canine Connection Release Dog Adoption Application

Although all of our Golden and Labrador Retrievers are carefully bred and trained, not all of the dogs in the Warrior Canine Connection program will choose the path of a working dog. However, these dogs are excellent companion animals. When we determine there are health or temperament issues that warrant a career change, we look for homes where our dogs will live the life of a well-loved member of the family. Priority is always given to Veterans, and we encourage applications from individuals who are interested in participating in dog activities like tracking, search and rescue, agility and obedience. We will place the dogs in the most well suited homes and will inform the new owner about each dog's limitations and training level.

The dogs are fully vaccinated, micro-chipped, spayed or neutered and have received various levels of training. It is important to understand that these dogs are **not** service dogs and are released from our program for specific reasons. There may be fees for these dogs, depending on the age of the dog and the reason for release.

If you are interested in applying to adopt one of Warrior Canine Connection's Release Dogs, please complete this application, scan and return by email to [info@warriorcanineconnection.org](mailto:info@warriorcanineconnection.org) or by mail to Warrior Canine Connection, 14934 Schaeffer Road, Boyds, MD 20814

Date \_\_\_\_\_

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

1) How did you hear about WCC? \_\_\_\_\_  
\_\_\_\_\_

2) Why do you want to adopt one of our dogs? \_\_\_\_\_  
\_\_\_\_\_

3) Do you have any family members who have served or are currently serving in the Military? \_\_\_\_\_  
\_\_\_\_\_

3) What type of residence do you have?  
 House       Townhouse       Apartment       Duplex       Condo

4) Do you own or rent your residence?     Own       Rent  
If you rent your home, can you provide written verification that dogs are permitted in your residence,  
along with your landlord's name and phone number?     Yes       No  
Landlord's Name \_\_\_\_\_ Phone number \_\_\_\_\_

5) Do you have a fenced yard?     Yes       No  
If yes, what type of fence do you have? \_\_\_\_\_ Height? \_\_\_\_\_

6) If the dog were destructive to the yard or building, how would you handle the situation? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7) Please list all the members of your household and their ages: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8) Who will be responsible for caring for this dog? \_\_\_\_\_

9) How will you exercise your new dog and how often? \_\_\_\_\_  
\_\_\_\_\_

10) Where will the dog stay during the day? \_\_\_\_\_  
\_\_\_\_\_

11) Where will the dog stay during the night? \_\_\_\_\_  
\_\_\_\_\_

12) How many hours will this dog be alone? \_\_\_\_\_

13) Do adult family members work outside the home?  No  Yes. Who? \_\_\_\_\_  
\_\_\_\_\_

14) Have you ever owned a dog?  No  Yes. When? \_\_\_\_\_

If yes, please list any animals you've owned in the past:

Name: \_\_\_\_\_

Breed: \_\_\_\_\_

Gender:  Male  Female

Age of Dog when Acquired: \_\_\_\_\_

Length Owned: \_\_\_\_\_

15) Please list any other pets in your household along with their ages and whether or not they've been neutered or spayed. \_\_\_\_\_  
\_\_\_\_\_

16) Can you provide proof of vaccinations for your pets?  Yes  No

17) Please give us the name and phone number of your veterinarian.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Veterinary Hospital: \_\_\_\_\_

18) What do you estimate it will cost to care for a dog each year? \$ \_\_\_\_\_

(Food, grooming, licensing, veterinary care and vaccinations)

19) What do you plan to feed the dog? \_\_\_\_\_

20) Do you have a breed or gender preference?

Male                       Female                       No preference

Golden Retriever       Labrador Retriever       No preference

21) What energy level dog would you prefer?

High       Medium       Moderate       Mellow

22) Are you willing to take responsibility for a dog for the rest of his/her life, possibly 10 years or more?

Yes       No

23) Do you consent to a visit to your home from a WCC representative?     Yes       No

24) If we are unable to visit your home due to distance, can you provide us with:

a) A video of your home, yard, family members and animals?     Yes       No

b) Three references we can contact?                                       Yes       No

25) Are you willing to come to WCC and pick up the dog?     Yes       No

I acknowledge that the information contained on this form is true and correct. I understand that any misrepresentation of facts may result in the removal of the adopted dog from my home.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

**Warrior Canine Connection**  
14934 Schaeffer Rd  
Boyd's, MD 20841  
(301) 260-1111  
[www.WarriorCanineConnection.org](http://www.WarriorCanineConnection.org)