

Western
Washington
Whippet
Association
Whippet Rescue

New Owner Application

Please complete form and return to:
Laurel Wilks
1108 Union Mills Rd. SE
Olympia, Wa. 98503

Date: _____

Name: _____ E-Mail _____

Address: _____

City, State, Zip: _____

Day Phone: _____ Evening Phone: _____

Number of adults in home ____ Ages of adults _____ Number of Children ____ Ages of children _____

Type of dwelling House Apartment Townhouse Duplex Other

Do you have a fenced yard Yes ____ No ____ Sm. Med. or Lg? How tall is the fence? _____

Do you own or rent? (If you rent, please list your landlords name, address and phone number.)

Does your rental agreement allow pets? Yes ____ No ____

Name and address of nearest relative not living with you: _____

Are all members of your household in agreement with the adoption? (Please comment)

Please list all animals living with you (include small caged animals as well as (Livestock)

Pet's Name	Type	Age	Spayed/Neutered?	How Long owned?
------------	------	-----	------------------	-----------------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

If you have a dog in your residence now, have you ever introduced it to a new dog at your residence? Yes ____ No ____

If yes, how did your dog react? _____

Have you ever owned a Whippet? Yes ____ No ____ Any other Sighthound Yes ____ No ____

Do you still have it? Yes ____ No ____ Died? ____ Other ____

If other, please explain or tell us how the dog died.

Please provide info on your veterinarian. Clinic Name _____

Doctor _____ Address _____

_____ Phone Number _____

Check as many as apply:

What do you want your Whippet to be?

- Housepet Breeder Racer Obedience
- Watchdog Lure Courser Show Dog Field Courser

What will your Whippet need to get along with?

- Other Dogs Cats Birds Small Rodents
- Livestock Children Men Women
- Other (Please comment) _____

I prefer a Whippet that is:

- Senior (8-12 years) Adult (2-8 years) Older Puppy (6-24 months) Young Puppy (3-6 months)
- Please note that young puppies are not frequently available.

- Male Female A certain color _____

Where will your Whippet be most of the time?

- Inside the house Outside in the yard Outside in kennel

How will you contain the dog during your absences from home:

- Crate Kennel Loose in house Loose in house with dog door access
- Outside in yard

How many hours of the day will the dog be alone _____

Where will the dog sleep? _____

How do you plan to exercise your Whippet? _____

What specifically attracted you to the Whippet breed? _____

Do you object to a physical inspection of your premises and a personal interview: No Yes

Please list times most convenient for you _____

Please list names and phone numbers of (3) personal references:

Please include any additional pertinent information, to enable a better fit between dog and guardian, on the back of these pages.

Signature of Applicant Date Signature of Co-Applicant Date

Thank you!

Please sign and return your application to the name and address listed at the top.