

# DOG VISITATION REQUEST

If you are interested in meeting one of our dogs for potential adoption, please fill out this form to request a meet-and-greet visit. Our Adoption Centre Manager will be in touch to schedule an appointment. Submission of this form is not confirmation of an appointment, or approval for adoption.

Please note we cannot accommodate same day visitations, and appointments are generally made for one dog at a time. Alternatively, you can come to our Dog Day Open Houses (the first Saturday of each month, 1:00-3:00PM) to meet numerous adoptable dogs throughout the afternoon.

## CONTACT INFORMATION\*

\*Information of individual(s) who will have legal responsibility for the adopted animal. Must be 18 years of age or older.

First Name:  Last Name:

Phone:  Preferred contact: ☐ Phone ☐ Email

Email:

## GENERAL INFORMATION

1) Name of the dog you are interested in meeting:

2) Why do you want to adopt? (check all that apply)

- ☐ Companion for yourself
 ☐ Companion for a child
 ☐ Companion for another person  
☐ Companion for another pet
 ☐ Working (i.e. farm, sled)
 ☐ Security  
☐ Service/ESA animal
 ☐ Other:

3) What is your experience with dogs? (check all that apply)

- ☐ I am a first time dog owner
 ☐ I need a dog that is already trained  
☐ I have walked/dog-sat before
 ☐ I have had a job with dogs  
☐ I have done obedience training
 ☐ I have lots of experience and could handle a difficult dog

4) As some of our dogs will do best with certain age groups, please indicate how many people live in the home and their ages (including infants, children, and adults):

3) Are there currently other dogs, cats or other animals in your house? ☐ Yes ☐ No

Dog, Cat, Bird, Other	Breed	Age	Sex	Spayed / Neutered
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No

## APPOINTMENT INFORMATION

Thank you for requesting a dog visit. Our Centre Manager will review your request and respond within 2 to 3 business days to schedule an appointment. To better help us arrange a visit, please indicate your general weekly availability (*check all that apply*):

- |              |   |  |  |
|--------------|---|--|--|
| • Wednesday: | <input type="checkbox"/> 12:30pm - 1:30pm | <input type="checkbox"/> 1:30pm - 2:30pm | <input type="checkbox"/> 2:30pm - 3:30pm |
| • Thursday:  | <input type="checkbox"/> 12:30pm - 1:30pm | <input type="checkbox"/> 1:30pm - 2:30pm | <input type="checkbox"/> 2:30pm - 3:30pm |
| • Friday:    | <input type="checkbox"/> 12:30pm - 1:30pm | <input type="checkbox"/> 1:30pm - 2:30pm | <input type="checkbox"/> 2:30pm - 3:30pm |
| • Saturday:  | <input type="checkbox"/> 12:30pm - 1:30pm | <input type="checkbox"/> 1:30pm - 2:30pm | <input type="checkbox"/> 2:30pm - 3:30pm |

*Note: This is not a scheduled appointment. Appointments will be booked based on staff and volunteer availability.*

## DOG MEET-AND-GREET WAIVER

***Note: All participants MUST read and agree to this waiver (through a signature below) as a requirement to meet the dog you are interested in at the time of your appointment. This signature will cover yourself (must be over 18), other adults in your household that will be present for the meet and greet, and any children under the age of 18 (herein referred to as a Minor Participant) that will be present.***

By agreeing to meet with the dog, I do hereby agree and acknowledge the inherent risk in this activity, including but not limited to personal injury (including but not limited to bites and scratches), illness, death or property loss. I willingly assume all such risks, both known and unknown. I hereby release the Bow Valley SPCA Parties from all liability, and agree to indemnify and hold harmless the Bow Valley SPCA Parties from any and all claims, demands, expenses, and causes of action of any kind whatsoever that arise out of the actions of myself, any other parent or guardian of a Minor Participant, or my Pet while participating in this activity.

\_\_\_\_\_  
*Signature or Digital Name*

\_\_\_\_\_  
*Signed date*