

**Rescue/Rehoming  
Application to Adopt**

**Print this request. Please print legibly or type. Return completed form to:**

Lisa Clarkson  
BTCA HEART National Rescue Coordinator  
Two North Canton Road  
West Simsbury, CT 06092-2000  
860-651-4711  
lclarkson007@gmail.com



**About You**

Date

Name

Address

City / State / Zip

Phone: Home:

Work: Cell:

E-mail address:

Number in Household: Adults:  
Children & Ages:

Other Pets:

Reasons for wanting a Bedlington:

Have you had a dog before?

Was it spayed/neutered?

If not, please explain

Name, Address, & Phone of your  
veterinarian

May we call him/her for a reference?

**About Your Home**

Do you live in a house \_\_\_\_\_. apartment\_\_\_\_, condo \_\_\_\_\_. or other \_\_\_\_\_.

Is your yard fenced? If not, how will this dog be exercised?

How will the dog be allowed to relieve itself in inclement weather?

Will anyone be home with the dog during the day?

If not, how many hours will the dog be home alone?

Will the dog be crated while alone?

Where will the dog sleep?

Do all adults living in the household want a dog?

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Please check all that apply:

\_\_\_\_\_ Busy Household-visits by friends, children in & out, etc.

\_\_\_\_\_ Moderate Household-normal comings & goings

\_\_\_\_\_ Quiet Household-few people come & go

\_\_\_\_\_ Lots of children in neighborhood

\_\_\_\_\_ Live on busy street or highway

\_\_\_\_\_ Dog will be an indoor dog

\_\_\_\_\_ Dog will be an outside dog

What would cause you to return the dog to BTCA-HEART? Please check all that apply

\_\_\_\_\_ a new job (working more, longer hours)

\_\_\_\_\_ divorce

\_\_\_\_\_ moving

\_\_\_\_\_ new baby

\_\_\_\_\_ if the dog needed expensive medical care

\_\_\_\_\_ bad habits (chewing, destruction, biting, unable to housebreak, etc)

\_\_\_\_\_ illness or death in family

\_\_\_\_\_ other (please explain) \_\_\_\_\_

- Would you be willing to take a “special needs” dog (scared, handicapped, needs daily medication or medical care)? \_\_\_\_\_
- Would you be willing to work with a “behavior problem” dog? \_\_\_\_\_
- Would you be willing to take an older dog? \_\_\_\_\_
- Do you have a preference for color \_\_\_\_\_ sex \_\_\_\_\_ age \_\_\_\_\_
- Would you keep the dog on heartworm prevention? \_\_\_\_\_

**I understand that if for any reason I cannot keep this dog, I will return it to BTCA-HEART.**

Name (print) \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_