

Dog Adoption Application and Contract

Only fill out this form if you have spoken with a Krabloonik Representative and are serious about adopting this dog.

Your Name	First	Last		
	FIISU	Lasi		
Email *				
Residential	property you and	dog will be living	l: *	
	Street Address	Cit		State / Province / Regio
	Postal / Zip Cod	de United States	-	Country / Region
Phone *		,		
	###-	###-	###	±#
Secondary (
Name, ema	il address, and pho	one number.		
		-		
		₩		
4		▶		
Spouse, roc	ommate, relative, a	anyone living in	your househo	old.
Enter the N	ame of the Dog Be	elow: *		

The Adopter understands, promises, and agrees, upon receiving the dog to forever release, discharge and hold harmless Krabloonik Inc from any and all actions, suits, debts, duties, claims and demands resulting from the action or omission and rising out of any cause whatsoever, without limitation, as related to the adoption. Adopter also agrees to keep any information about this dog confidential and will make no reference to the name of Krabloonik, dogsledding, sled dog etc.. referencing where this dog came from in any social media or public sites or forums. All health information exchanged in this adoption will be kept confidential and only shared between the adopter and adoptee. Adopter also agrees that this is an adoption agreed upon by both parties and in no way is to be referenced to or indicated as a 'rescue'.

Spa	y/Neuter Status *
Ple	ease select 🔻
Colo	or(s), Markings and Breed *
Dog	y's Date of Birth or Approximate Age *
_	v did you hear about us?
0	Company Website-Krabloonik.com
D	Friend Web County and County
0	Web Search such as Google
0	Social Media Facebook, Twitter, Google + etc
Plea ——	ase describe your ideal dog based on your lifestyle? *
- 1	▼
	at activities do want to share with your dog.
	at specific traits are you looking for in a dog? Please check all that apply. * Confident
	Protective
	Sensitive
	Нарру
	Lazy
	Quiet
	Focused
	Aloof
	Dominate
	Independent
	Loyal
	Ball or Frisbee oriented
	23. 5. 1. 15500 01101100

	Needy/ Strong Human Bond
	Affectionate
	Reserved
	Gentle
	Extremely Trainable
	Tolerant
	Energetic
	Vocal
	Good with Children
	Predatory
	Shy
	asons why you might choose to return your dog to Krabloonik. Please check all that bly. *
	Too Shy
	Fearful of Men
	Larger than expected as an adult
	Makes the house smell bad
	Too affectionate
	Moving
	Cost of Pet Maintenance
	Personal Problems
	Having no time for a pet
	Biting
	Incompatibility with other pets
	House Soiling
	Allergies
	Chewing Valuables
	Shedding
• Wh	at are the ages of your children? *
 fy	ou do not have children, please put "N/A"

	ducated on how to treat a dog? Pulling on ears, jumping, being loud e og having anxiety or getting injured and your child being bitten. We ar
only willing to adop handling. *	ot to households with children if parents are proactive about responsib
Yes, No, or I don't	know.
Who will be the doo	g's primary caregiver? *
This person must b caregiver.	e over 18. We do not accept anyone under 18 as a suitable primary
What pets (type/ n	umber) do you currently have? *
4	
Will your current no	ets accept this new net into your household and if not are you willing t
	ets accept this new pet into your household and if not are you willing training for appropriate introductions? *
seek professional tr	raining for appropriate introductions? *
seek professional tr Yes, No, or I don't	raining for appropriate introductions? *
seek professional tr Yes, No, or I don't	raining for appropriate introductions? * know
Yes, No, or I don't Are your current per Please select	raining for appropriate introductions? * know
Yes, No, or I don't Are your current per Please select	know ets spayed/neutered? *
Yes, No, or I don't Are your current per Please select Are they current or	know ets spayed/neutered? * their vaccinations? *
Yes, No, or I don't Are your current per Please select Are they current or	know ets spayed/neutered? *
Yes, No, or I don't Are your current per Please select Are they current or Please select Is anyone in your h	know ets spayed/neutered? * In their vaccinations? *
Yes, No, or I don't Are your current per Please select Are they current or Please select Is anyone in your h Please select How many hours a	know ets spayed/neutered? * their vaccinations? *
Yes, No, or I don't Are your current per Please select Are they current or Please select Is anyone in your h Please select How many hours a	know ets spayed/neutered? * In their vaccinations? * Industrial or appropriate introductions? * In their vaccinations? * Industrial or appropriate introductions? * In their vaccinations? * Industrial or appropriate introductions? * In their vaccinations? * In their vaccinations? * Industrial or appropriate introductions? * In their vaccinations? * In their vaccinations * In the their vaccin
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ilable, please also provide your landlord's physical address and e-mail
linquished a pet to another person or organization? *
uished a pet in the past, please explain the circumstances.
▼
at dogs can live 15+ years, are you committed to keeping this dog with
for a new dog at this time? *
y able to purchase all the y for your new dog? *
g sleep? *
t trimered mails and along ones tooth, and another immentant to a doub
t trimmed nails and clean ears, teeth, and coat are important to a dog's eing; and are you willing to ensure that these items are taken care of on a

•	Will you have time to exercise the dog daily? *
	Please select ▼
•	If you answered "no" to any of the questions above, please explain:
	▼ ▼
•	To be considered, you must be 18 years of age or older; have identification showing your
•	current address; have the knowledge and consent of your landlord; and be willing and able to spend the time and money to provide training, medical treatment, and proper care for
	the dog. By typing in your name, you acknowledge that all the information is correct and that you
	meet the requirements stated above.
	Sign here: *
•	This dog is herein referred to as "Dog." The Adopter hereby acknowledges the following: Please check each of the following to show that you have read and acknowledge the terms. *
	Representations about the nature of the adopted dog, the nature and extent of legal
	liability, and the extent of financial responsibility have not induced the adopter to sign the contract.
	There is no adoption fee at this time.
	The dog shall not be sold, given to, or adopted to anyone else, nor shall there be
	transfer of ownership to any firm, corporation or organization of other homeless animals such as a rescue facility or shelter.
	The dog shall be returned to Krabloonik Dogsledding in the event the Adopter cannot
	keep it, Adopter will bear any and all fees for court cost and attorney fees if Krabloonik has to redeem the dog.
	All dogs must be up to date on their Vaccinations and Rabies. If a puppy, the Dog shall
	complete the DAPP series of three shots and Rabies. Adopter agrees to comply with any and all state regulations regarding vaccinations and Rabies.
	The adopter agrees to obtain these vaccines as well as immediate vet care for the dog
	should it become ill or injured and takes full financial responsibility for this care
	Krabloonik makes no explicit or implicit guarantees in reference to the health/and or
	temperament of the dog.

The dog is accepted "as is" and the Adopter assumes responsibility for treatment of all
existing conditions, and any other conditions of physical or temperament changes that may occur.
Krabloonik cannot guarantee the health of any animal, and shall not be held responsible
for any medical expenses incurred.
The dog will not be allowed off leash except in adequately fenced areas.
The dog will not live in the garage, doghouse or outbuilding.
The adopter agrees to obtain licenses required by local law.
The dog will not be left unsupervised with children at anytime.
The dog is to have food, water, and shelter at all times.
The Adopter shall refrain from any abuse of the animal or treat the animal in a mean,
cruel or physically rough manner.
The dog will never be left alone in a car or ride in the back of a truck.

• REFERENCE 1

Animal Associated Reference

-Someone who knows, from experience, how you care for your pets or interact with pets. (vet, pet sitter, neighbors, etc).

Include reference's name, phone number, job title and company. *

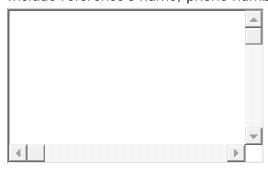


• REFERENCE 2

Professional Reference

-Someone you have worked with that can attest to your level of responsibility. (supervisor, coworker, vendor, etc).

Include reference's name, phone number, job title and company. *



Include refer	ence's name, phone number and how you know them. *
Theilide Feler	ence's frame, priorie flumber and now you know them.
4	▼ ▶
Breed – All de	ogs at Krabloonik are Alaskan Huskies.
Health – Krak time of adopt	bloonik only adopts healthy dogs. Many medical problems are undetected at
Health – Krak time of adopt this day forw Behavior - W	bloonik only adopts healthy dogs. Many medical problems are undetected at tion. All medical needs of the dog will be the responsibility of the adopter from
Health – Krak time of adopt this day forw Behavior - W trained or no household.	bloonik only adopts healthy dogs. Many medical problems are undetected at tion. All medical needs of the dog will be the responsibility of the adopter froward. For a list of affordable vets please contact us.
Health – Krak time of adopt this day forw Behavior - W trained or no household. I have read t	bloonik only adopts healthy dogs. Many medical problems are undetected at tion. All medical needs of the dog will be the responsibility of the adopter froward. For a list of affordable vets please contact us. We cannot tell you if the dog is good with kids, cats, other dogs, rather it is possible to the dogs behavior will depend on the way you run your

By typing your name above, you certify that the information you provided is true and that you agree to the terms presented.

Name of Krabloonik Representative you consulted with: *

Signature Line: *

•	*Rabies Prevention* I (adopter)acknowledge that a link to an informative Rabies brochure or a paper copy of the brochure will be emailed to me/given to me after I click the submit button and by signing this line I am agreeing to read this brochure as it is a requirement by law. *
	The adopter must sign a dated register provided by Krabloonik stating he/she will be receiving and reading this document per Colorado State Law.
•	Date Time *
	MM/ DD/ YYYY 🕮
•	A representative of Krabloonik has given me all medical records associated with the dog I am adopting today. *
	Please sign with your first and last name confirming you received all of the dogs medical records the day of exchange.
•	Submit