



# Irish Setter Club of Central Connecticut

## Rescue Adoption Application

Fill out and return to:  
Kate Seymour  
34 Merwin Brooke Rd.  
Brookfield Center, CT 06805

Application Date:     /     /			
Name:		Phone: (     )	
Address:			
City:		State:	Zip:
Occupation:			
Household members and their ages:			
Other pets owned and their ages:			
Veterinarian's name:		Phone: (     )	
Do you own your home? Y / N	Type of home:	Neighborhood type:	
If renting, landlord's name:		Phone: (     )	
Fenced yard? Y / N	Height:	Size:	Type of fence:
Dog will live: Inside / Outside			
Is an adult family member home during the day? Y / N			
If no, hours dog will be left alone during the day:			
Have you owned an Irish Setter before? Y / N	If YES, please give details below: (ie Breeder, what happened to it, etc.)		
Have you ever crate-trained a dog? Y / N		Taken an obedience course? Y / N	
Preference: Male / Female / No Pref		Age range: Under 2 / 2-7 / 7 and older	
More specific:			