



'FOLLY'

THE LABRADOR LIFELINE TRUST

Registered Charity 1076061

**Patrons: Air Chief Marshal Sir Richard Johns GCB KCVO CBE
Lady Elizabeth Graydon DL**

6, Tottenham Close, Bramley, Tadley, Hampshire, RG26 5NW

Tel: 01256 884027 E-mail: Selabres@btconnect.com website: www.labrador-lifeline.co.uk

HOME ENQUIRY

HD _ _ _

Your name

Partner's name

Address including postcode

Home tel

Include STD codes

Work

Emergency

Mobile

E-mail address

Please answer all questions fully

Do you have any children living at home?		If yes their age(s)
Do any children visit regularly?		If yes their age(s)
Have you had a dog before?		If yes what breed(s)
Do you have a dog now?		If yes what breed, age, sex, castrated/spayed, and how does it react to visiting dogs?
Do you look after or visit any dogs in the family?		If yes what age, sex, castrated/spayed?
Have you any other pets or livestock?		Eg. Cat / Rabbit / Horses / Chickens / Goats / Sheep / Other
Are you working?	Your partner?	
What do you do?	Your partner?	
What hours do you work? (including travelling time)	Your partner?	
Please indicate your age range	Your partner	
Do you live in the	Where will the dog live?	
What sort of property do you live in? * If rented, a letter of authority to keep a dog will be required.	Do you have a securely fenced garden?	
	Approximate height	
Do you have your own transport?		If Yes, Vehicle Type?

Do you have the means to afford upkeep/vaccinations/veterinary treatment of a dog placed with you?		
Are you interested in a puppy (2-6 months old)?		
Minimum age:	Maximum age:	
Can you consider taking on two dogs that have grown up together?		
Can you take on or have experience in caring for dog with 'special needs' e.g. disability/medication		
Please provide the Name, Address and Telephone No. of the Vet with whom you would register an adopted dog.		
Please provide the Name, Address and Telephone No. of the Kennel Club Accredited or APDT standard canine training establishment where you would attend training classes with an adopted dog that requires training.		
What are your reasons for wanting a dog now and a Labrador in particular?		
Where or how did you hear about The Labrador Lifeline Trust? (Website/etc)		
Do you intend to be away from home or take a holiday in the next 6 months? If yes, for how long?		
Have you applied to any other Rescue Organisations for a dog? If yes, which?		
If we are unable to offer you a dog within six months, would you like us to keep you on our register? N.B. If you find a dog elsewhere, will you please let us know by contacting the Helper named below.		
Do you agree to representatives of TLLT visiting to ascertain the welfare of the dog placed with you?		
Do you agree to return to TLLT any dog you can no longer keep?		
SIGNED	YOUR PARTNER	DATE
By inserting your name(s) here you are deemed to have signed this document		
Any questions you may have will be answered by the helper who visits. Please return this form to your local helper whose name and address appears below:		
Name	Address (inc. postcode)	
Telephone	Mobile	
Please note that Dogs Rescued by TLLT are not kept at the homes of Helpers, Area Coordinators or Representatives. The address provided is for mailing purposes only.		
FOR OFFICE USE ONLY		
Date of Visit:		
Signed:		
Helper's Name:		
Attach to TLLT 1a Home Visit Report and forward to Area Coordinator		