

American Cavalier King Charles Spaniel Rescue Trust

References

The American Cavalier King Charles Spaniel Rescue Trust requires references from both potential foster homes and potential adoptive homes. This form must be completed and submitted with the Foster Home Application and the Preliminary Adoption Application.

PERSONAL REFERENCES

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone(s): _____ E-mail: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone(s): _____ E-mail: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone(s): _____ E-mail: _____

VETERINARIAN REFERENCE

Clinic name: _____

Veterinarian's name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone(s): _____ E-mail: _____

APPLICANT'S RELEASE OF INFORMATION

By signing this document, I hereby give the above-named personal references and veterinarian permission to release any information requested by the ACKCS Rescue Trust regarding the care and treatment of my animals and my fitness for fostering or adopting a rescue Cavalier.

Signature: _____ Date: _____

Printed name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone(s): _____ E-mail: _____