



"Dogs are not our whole life, but they make our lives whole." — Roger Caras

We understand that most families have busy lives and full-time jobs, and we don't expect anyone to make major lifestyle changes to welcome a puppy. Every household is unique, and this form helps us learn more about your needs so we can ensure the best possible match between our dogs and their guardian families. Whether you're an experienced dog owner or welcoming your first puppy, we'll make sure you have the information and support you need for a happy, successful partnership.

## Your Contact Information

| First Name:                                   |
|---|
| Last Name:                                    |
| Email:  |
| Phone:  |
| Address:                                      |
| City:   |
| State:  |
| Zip Code:                                     |
| Social Media Contact (Facebook or Instagram): |
| How did you hear about us?                    |



## \* Puppy Preference

| • Is there one specific dog you are applying for, or are you generally applying to be a guardian home in the future?   |
|--|
| • Please tell us a little about yourself and your family's lifestyle.  |
| • What about being a guardian home is more appealing to you than simply owning a pet? Please be thorough.  |
| ** Program Expectations  |
| • If you have a guardian female:   |
| Are you aware that you will be required to relinquish her to us for approximately 10 weeks for each litter (up to twice a year)? Are you emotionally prepared for that period apart? |
| ☐ Yes ☐ No ☐ Not applicable  |
| • If you have a male:  |
| Will you be prepared to transport him to us or to the female during breeding?  |
| ☐ Yes ☐ No ☐ Not applicable  |



| • Testing     | g Partic | ipation   |
|---------------|----------|---|
| Are you       | willing  | to assist with health, coat, and color testing? (All testing costs are covered by the breeder.) |
| □ Yes         | □ No     | □ Not applicable  |
| • Update      | es & Co  | mmunication   |
| Are you coat? | willing  | to send frequent photo, video, and text updates about the dog's health, temperament, and        |
| □ Yes         | □ No     | □ Not applicable  |
| • Female      | Heat (   | Cycles  |
| If you ha     | ve a fe  | male, are you comfortable managing her heat cycles (with our guidance)?                         |
| □ Yes         | □ No     | $\square$ Not applicable  |
| • Male B      | ehavio   | rs  |
| If you ha     | ve a m   | ale, are you aware that he may occasionally mark or hump?                                       |
| □ Yes         | □ No     | $\square$ Not applicable  |
| • Breedi      | ng Deci  | sions   |
| Are you       | willing  | to allow all breeding-related decisions to be made by us?                                       |
| □ Yes         | □ No     | $\square$ Not applicable  |
| • Public      | Percep   | tion  |
| Are you       | prepar   | ed to respectfully defend your dog and/or our program if others disagree with breeding?         |
| □Yes          | □ No     | ☐ Not applicable  |



What do you like or dislike about our breeding program?

## \*\* Home and Family Information

| • Type of Housing:  |  |  |  |  |
|---|--|--|--|--|
| $\square$ Apartment $\square$ Condo $\square$ Single Family Residence $\square$ Other                         |  |  |  |  |
| • Do you:   |  |  |  |  |
| $\square$ Own this home $\square$ Rent-to-own $\square$ Rent $\square$ Stay with family                       |  |  |  |  |
| • Landlord Permission (if renting):   |  |  |  |  |
| ☐ Yes ☐ No ☐ Does Not Apply   |  |  |  |  |
| • Fenced Yard:  |  |  |  |  |
| $\square$ Yes $\square$ No $\square$ Not yet, but we're getting one $\square$ No, but we have a dog play area |  |  |  |  |
| • Is any head of household currently serving in the U.S. Military?  |  |  |  |  |
| □ Yes □ No  |  |  |  |  |
| • How many adults live in your home?  |  |  |  |  |
| □ 1 □ 2 □ 3 or more   |  |  |  |  |
| • How many minor children live in your home?  |  |  |  |  |
| $\square \ 0 \ \square \ 1 \ \square \ 2 \ \square \ 3 \ \text{or more}$                                      |  |  |  |  |



| • How many children under 2 years old?   |
|--|
| □ None □ 1 □ 2 □ 3 or more   |
| ** Signature   |
| Signature (type first and last name):  |
| Date:  |
| ☐ I certify that the information provided is true and accurate. I understand that submission does not guarantee placement as a guardian home and that final approval is at the discretion of Magnolia State Poodles and Doodles. |