**Date:**

**Full Name:**

**Full Name:**

**Address:**

**City:** **State:**  **Zip:**

**Phone Number:**

**Can you receive texts?  ☐ Yes  ☐ No**

**Email**

**Veterinarian Information:**

**Veterinarian Clinic Name:**

**Doctor Name:**

**Address:**

**City:** **State:**  **Zip:**

**Phone Number**:

**How Did You Hear About Us?**

Referred By:Facebook: ☐Website:☐ Other:

**Puppy Information**

**1. Will the puppy be an inside dog? ☐ Yes ☐ No**

**2. What puppy are you most interested in?**

**Color:  Male: ☐   Female: ☐**

**3. If the puppy you are interested in is not available, what would be your second choice?**

**4. Do you intend to get the puppies ears cropped? ☐ Yes ☐ No**

**If yes, do you already have a qualified vet in your area to do the procedure?**

**☐ Yes ☐ No**

**Or would you be interested in having my vet perform the procedure?**

**☐ Yes ☐ No**

**5. Where will the puppy be kept during the night?**

**6. Where will the puppy be kept during the day?**

**7. How many hours on average will the puppy be left alone?**

**8. Have you ever owned a dog before? ☐ Yes ☐ No**

**9. Do you have any other pets? ☐ Yes ☐ No**

**How many?**         **What breeds?**

**10. Do any of your other animals have any aggression or behavior issues that would make it hard for your new puppy to join the home?**

**11. If you were to have an expected or unexpected child during any phase of the life of your Doberman, would you feel the need to find him/her a new home?** **If so, why?**

**12. Does anyone in your household have allergies to animals? ☐ Yes ☐ No**

**13. Do you understand that a Doberman puppy will have high energy until at least 1 year of age and up to 3 years of age? ☐ Yes ☐ No**

**14. Why do you want a Doberman?**

**15. How will the puppy be confined when he/she is outside?**

**16. Do you have a fenced in yard or suitable pen? ☐ Yes ☐ No**

**17. Do you have, or have you ever had an outside dog? ☐ Yes ☐ No**

**If yes, Why?**

**18. Have you ever returned a pet to a breeder, rehomed, or surrendered to a shelter? ☐ Yes ☐ No**

**If yes, what was your reason?**

**19. Have you ever had a behavior problem with a pet? ☐ Yes ☐ No**

**If yes, how did you handle it?**

**20. Are you interested in limited or full registration?**

**21. Do you understand that full registration is available at a higher cost?**

**22. If interested in full registration, what is your reason?**

**23. Do you agree to keep your dog on heart worm preventative?**

**24. Do you agree to keep the dog on flea care?**

**25. Do you agree to keep the dog on a quality diet that is fit for him/her?**

**☐ Yes ☐ No**

**26. Do you understand that once you place a deposit, it is non-refundable?**

**☐ Yes ☐ No**

**27. Do you understand that any money received is non-refundable and will only go toward the purchase of your puppy, which will be honored indefinitely but not re-funded for any reason even if you decide not to purchase the puppy?**

**☐ Yes ☐ No**

**28.      Do you understand that you may never sell or find a new home for the**

**puppy? ☐ Yes ☐ No**

**29.      If the placement does not work for any reason, he/she will come back to**

**me. ☐ Yes ☐ No**

***By signing this application you understand that it is a legally binding agreement.***

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**