## Breely Kennels

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## ADOPTION APPLICATION

Today's Date:
I wish to adopt a:MaleFemaleEither

PuppyAdult Dog Either

First and Last Name: $\qquad$

Address: $\qquad$
City: $\qquad$ State: $\qquad$ Zip Code: $\qquad$
E-mail Address: $\qquad$
Home Phone \#: $\qquad$ Cell Phone \#: $\qquad$
Occupation: $\qquad$
Marital Status: $\square$ Single $\square$
Married
If married, how many years? $\qquad$
Spouse/Partner's Name: $\qquad$
Spouse/Partner's Occupation: $\qquad$
Does your spouse also desire to have a Golden Retriever? $\qquad$
If not, why? $\qquad$
Do you have children? $\square$ Yes $\square$ No

| Name | Age | Name | Age |
| :---: | :---: | :---: | :---: |
| Name | Age | Name | Age |

Do you own or rent your house? $\qquad$
How long have you lived in your current house? $\qquad$
$\qquad$
Have you ever owned a dog before? $\square$ Yes $\square$ No (If no, skip to ' $\downarrow$ ' on page 3)
What kind of dog(s)? $\qquad$
If you currently own a dog, please give a description of them (breed, age, sex, altered):

If you previously owned a dog, please give reason why you don't have it now:

Have you ever owned a dog(s) and decided you either did not want or could not keep the dog(s) anymore? $\square$ Yes $\square$ No

If yes, why? $\qquad$
Have you ever returned a dog(s) to a breeder?Yes $\square$ No

If yes, why? $\qquad$
What do/did you feed your dog(s)? $\qquad$
Where does/did the dog(s) live? (check all that apply)
$\square$ Inside the HouseKennel RunIn a Fenced Yard
Outside (Unfenced)

Other (explain): $\qquad$
How often do/did you take your dog(s) to the veterinarian? $\qquad$
Is/were vaccinations always up-to-date? $\square$ Yes $\square$ No
If not, why? $\qquad$
Do/did you have your dog(s) checked for intestinal parasites annually? $\square$ YesNo

If not, why? $\qquad$
Is/was your dog(s) on heartworm preventive?Yes

If not, why? $\qquad$
How often is/was your dog bathed and/or groomed? $\qquad$
Do/did you groom it yourself, or take it to a professional/veterinarian? $\qquad$
Have you ever taken your dog(s) to obedience class? $\square$ Yes $\square$ No
$\qquad$

Explain why you want a dog:

$\qquad$

Explain why you want a Golden Retriever: $\qquad$

How soon do you want a Golden Retriever? $\qquad$
Have you read any books on Golden Retrievers and/or dogs?YesNo

If yes, which ones? $\qquad$
Do you have a fenced yard?Yes No

If yes, what kind? $\qquad$
If no, do you plan to fence soon?Yes $\square$ No

If not, why? $\qquad$
What do you plan to feed this puppy/dog? $\qquad$
Where will this puppy/dog live? (check all that apply)
$\square$ Inside the HouseKennel RunIn a Fenced Yard Outside (Unfenced)

Where will helshe live most of the time? $\qquad$
Where will the dog be when he/she is alone? $\qquad$
Do you plan to do the following for this puppy/dog throughout its lifetime:
Maintain Vaccinations? $\square$ Yes $\square$ No Check for intestinal parasites? $\square$ Yes $\square$ No Give monthly heartworm and flea/tick prevention?Yes
How often do you plan to groom and/or bathe this puppy/dog? (check one)
Weekly

Bi-WeeklyMonthly

Bi-Monthly
$\square$ Other: $\qquad$
Who will groom/bathe the puppy/dog? $\qquad$
Do you know how to trim nails? $\square$ Yes $\square$ No If no, willing to learn? $\square$ Yes $\square$ No

How do you plan to exercise the puppy/dog? $\qquad$
How often do you plan to exercise the puppy/dog? (check one)Every 2-3 days
$\square$ WeeklyOther: $\qquad$
Do you plan on training your dog?YesNo If yes, for what? (check all that apply)Obedience
$\square$ ShowHunting Tracking Other: $\qquad$
If showing, have you finished an American Championship on a dog before? $\square$ Yes $\square$ No If yes, what breed(s)? $\qquad$ Will you train the dog yourself? $\qquad$ YesNo If no, who will? $\qquad$
Do you plan to breed the dog? $\square$ Yes $\square$ No
If yes, why? $\qquad$
Do you plan to spay/neuter the dog?YesNo

If not, why? $\qquad$
Are you aware of what the following can cost for your dog? $\quad$ Yes $\quad \square$ No * Good Quality Food

* Toys, Collars, Leads, \& Bowls
* Dog House, Dog Beds
* Crate
* Training Expenses
* Veterinarian Expenses
o Annual physical exams and vaccinations, heartworm prevention, flea/tick prevention, dentals, and other medical care.

Would these expenses be difficult for you to pay? $\square$ Yes $\square$ No
Are you willing to pay for these expenses when and if needed? $\square$ Yes $\square$ No
What is the maximum that you would be able to spend on the dog in a month? $\qquad$
How long do you plan to keep this dog? $\qquad$
How much time do you plan to spend with your dog? $\qquad$
Can you spend adequate time to raise a puppy, train it, and play with it? Yes No

Please check the example of the schedule closest to yours: (continued on following page)
$\square$ I am or someone in my family is home most of the time every day.
$\square$ I/we work or go to school part-time, but someone is home a good portion of the day.I/we work an eight-hour day, but someone is home most every night and weekend.I/we work eight hours or more a day, and I am and/or we are gone a lot of evenings and/or weekends with different activities.
$\square$ I/we have our own business in our home, so I/we am/are home a lot. I/we am/are able to take the dog to work.

Would you mind if the breeder took future interest in the puppy/dog's looks, health, training, etc?Yes No

If yes, why? $\qquad$
Is there any certain time of the year that you prefer to buy a puppy?YesNo

If yes, explain: $\qquad$
If something should happen and you cannot keep your puppyldog, will you contact us to see what you should do? YesNo

Are you willing to arrange a home visit to get the dog? $\quad$ Yes $\quad \square$ No
Any additional information/comments? $\qquad$
$\qquad$
$\qquad$

Applicants) Signature $\qquad$ Date $\qquad$
$\qquad$ Date $\qquad$

Thank you for filling this out. We will respond to you as soon as we can. Please be patient.

