## Claircrest Golden Retrievers

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## **ADOPTION APPLICATION**

Date	Male	Female	Either		
I wish to adopt a:	Puppy	Adult Dog			
Name					
Address					
City	State	Zip Code	Email		
Place of Employme	nt		Phone		
Address					
Please	e answer the questions	below and provide a br	ief explanation, if neces	ssary:	
Single	Married	Years	Married	_	
Spouse's Name		Does your spo	ouse also want a dog?	YesNo	
Do you have childre	en? Yes	No If yes, how man	y?		
Name	Age	Name		_ Age	
Name	Age	Name		_ Age	
Who referred you to	) Claircrest?				
Have you ever own	ed a dog(s) before?	YesNo I	f no, skip to ' $\Downarrow$ ' on page	2.	
What kind of dog? How long?					
Have you ever own	ed a dog(s), and decided	d you either did not want	or could not keep the dog	g(s) anymore?	
YesNo	If yes, why?				
Have you ever retur	med a dog(s) to a breed		5 / 5		
What do/did you fee	ed your dog?				
Where does/did the dog live and how much? kennel run outside					
in a fenced yard	inside	the house	other		
How often do/did ye	ou take your dog to the	veterinarian?			
Shots always up-to-	date? Yes	No Checked for	worms? Yes	No	

## ADOPTION APPLICATION continued...

Is/Was your dog on heartworm preventative? Yes No
How often is/was your dog bathed? groomed?
Do/Did you groom it yourself, take it to a professional, or the veterinarian?
Have you ever taken your dog(s) to obedience class? Yes No
Is/Was your dog trained? Yes No For what?
$\downarrow$
Explain why you want a dog.
Explain why you want a Golden Retriever.
Have you read any books on Golden Retrievers and/or dogs? Yes No
If yes, which ones?
Do you have a fenced yard? Yes No If yes, what kind?
If no, do you plan to fence soon? Yes No If no, why?
What do you plan to feed this pup/dog?
Where will it live?
Do you plan to maintain shots? Yes No Check for worms? Yes No
Do you plan to groom and/or bathe this dog? YesNo
How often? Weekly Monthly Yearly Other
Who will groom/bathe the dog?   Veterinarian   Groomer   Myself   Other
Do you know how to trim nails? Yes No Would you want to learn? Yes No
How do you plan to exercise the dog?
How often? Daily 2 or 3 times a week Weekly Other
Do you plan on training your dog? Yes No For what?
Do you plan on showing your dog? Yes No Obedience Yes No
Hunting Yes No Tracking Yes No
Show Ring Yes No Other
Will you train the dog yourself? Yes No   If no, who?
Where?     Professional trainer?

ADOPTION APPLICATION continued				
Do you plan to breed your dog? Yes	No	If yes, why?		
Do you plan to spay or neuter your dog?	Yes	No If no, why?		
muscles, x-rays for hip dysplasia, eyes	s, worm chec	No ks, heartworm medication, skin problems, pulled cataracts, ear infections, periodic blood samples, other health care cost for a variety of issues)		
Would these expenses be difficult for you to pay Are you willing to pay for these expenses when How long do you plan to keep this dog?	and if needed	? Yes No		
How much time do you plan to spend with your				
Can you spend adequate time to raise a puppy, t				
Please circle the example of the schedule closes	-			
<ul><li>A. I am or someone in my family is hom</li><li>B. I/We work or go to school part-time,</li><li>C. I/We work an eight-hour day, but some</li></ul>	ne most of the but someone meone is hom y, and I am an nome.	is home a good portion of the day.		
Would you be interest in joining a local club per	rtaining to dog	gs and/or Golden Retrievers? Yes No		
If no, why not?				
Would you mind if the breeder took future inter-	est in the pup/	dog looks, health, training, etc.? Yes No		
If yes, why?				
Is there any certain time of the year that you pre	fer to buy or 1	not buy a puppy? Yes No		
Explain				
Applicant(s) Signature		Date		
		Date		

Please feel free to call and make an appointment to visit *Claircrest* on a Friday afternoon or early evening that we are not going to a dog show!