## APPLICATION FOR PUPPY OR ADULT FROM BLOSSOM VALLEY KENNEL

BVPRTs@gmail.com 43033 Wildwood Lane

Aguanga, CA 92536

Guardianship of another animal is a major responsibility and a long-term commitment. You may share 10-20 years of your life with the puppy or retired adult that you acquire. I need the information below to evaluate your suitability to have a puppy or adult from me. Either email the saved file or mail to my address above.

HOW DID YOU LEARN ABOU  □ AKC Breeder listing	IT BLOSSOM VALLEY RUSSELL	TERRIERS?	
☐ Advertisement in			
☐ Breeders.Net listing			
☐ Parent Club listing			
☐ Personal referral from			
☐ Dog show contact			
☐ Online search for			
☐ Other:			
PERSONAL INFORMATION:			
Spouse/Partner Name?			
Address?			
City?		State/Zip?	
Your age:	Spouse/Partner's age	State/Zip?Children's ages:	
How long have you lived at this a	address?		
Do you own or rent?	May I visit your home to see	the dog and how you are taking care of it?	
Home E-Mail:			
Work E-Mail:			
What is your occupation and hov	v long in this field?		
How many hours are you away fi	rom home each day?		
Name, address, phone number o	of current employer:		
<u></u>			
Snouse/Partner's Home F-Mail:			
Spouse/Partner's Work E-Mail:			
Mhat is vour snouse/nartner's or	counation and how long in this field	?	
How many hours is your Shouse	Destruer away from home each de	; y?	
Name address nhone number o	of snouse/nartner's current employ	er:	
varrie, address, priorie transcre	n spousorpartner s carrent employs	JI	
Names relationshins and ages	of other adults who reside in your h	поте:	
varios, relationships, and ages (	or other addits who reside in your i	iome.	
Do all members of vour househo	old want to get a dog? No: □ Yes: :	□ If "no." who doesn't?	

DO YOU HAVE ANY OF THE FOLLOWING?
Fenced front yard? □ No: □ Yes: If 'yes," what size of yard and height of fencing?
Fenced back yard? □ No: □ Yes: If 'yes," what size of yard and height of fencing?
Pool? □ No: □ Yes: If "yes," is it fenced? □ No: □ Yes: If 'yes," what size and height of fencing?
Screens on your windows? □ No: □ Yes: If "no," can the dog escape from open windows? □ No: □ Yes:
Screen doors? □ No: □ Yes: If "yes," do the doors have strong self-closing mechanisms? □ No: □ Yes:
YOUR AND YOUR SPOUSE/PARTNER'S EXPERIENCE WITH DOGS AND OTHER ANIMALS:
Have you owned or been around a terrier before? □ No: □ Yes:  If "yes," explain:
List any other dogs & animals that you and your spouse/partner have had in your lives and state what happened to them:
TYPE OF DOG DESIRED?
When do you want to get a dog?
Sex desired: (i) Male: □ (ii) Female: □ (iii) No preference: □
Color desired: (i) White: □ (ii) White/black markings: □ (iii) White/tan markings: □ (iv) Tri-colored: □
Coat(s) acceptable: (i) Smooth: □ (ii) Lightly broken: □ (iii) Heavily broken: □ (iv) Rough: □ Age(s) acceptable: (i) Puppy (< 6 months): □; (ii) 6-12 months: □; (iii) 1 to 2 years old: □; (iv) adult (> 2 years): □
Age(s) acceptable. (I) Fuppy ( $<$ 0 months). $\Box$ , (ii) 0-12 months. $\Box$ , (iii) 1 to 2 years old. $\Box$ , (iv) addit ( $>$ 2 years). $\Box$
WHAT ACTIVITIES DO YOU PLAN TO DO WITH YOUR DOG?
Dog shows ¬; Agility ¬; Earthdog ¬; Barn hunt ¬; Dock diving ¬; Obedience ¬; Jogging ¬; Therapy dog ¬; TV/sleeping ¬ Will you take the dog that you get to basic training classes? No: ¬ Yes: ¬ If "no," then why not?
MISCELLANEOUS:
Do you agree to spay/neuter your dog and send me a sterilization certificate by 12 months?  No: □ Yes: □
If "no," why not?
Where will your dog stay during the day?
Where will your dog sleep at night?
Under what circumstances would you surrender your dog to a shelter or to me to rehome?

If your dog has an emergency or serious illness, what is the maximum you are willing or able to spend on veterinary care?

(i) None □ (ii) up to \$100 □ (iii) \$101-250 □ (iv) \$251-500 □ (v) \$501-1,000 □ (vi) \$1,001-5,000 □ (vii) no limit □

<u>REFERENCES</u> :	
Name, address, and phone nu	ımber of your veterinarian reference:
and will know your whereabouts Reference #1's name: Address:	numbers of three personal references who can vouch for your humane treatment of animals in the future:
Email address:	
Reference #2's name:	
Adaress:	
Reference #3's name: Address:	
Phone:	
AGREEMENT:  By typing or signing our name  My/our typed name(s)  The facts provided in a lower realize that all su  Any such fact that is not sale ("Contract") that  Such misrepresentation  Such misrepresentation  Contract and retain all	
Applicant's Signature:	
Date signed:	City/State where signed:
Spouse/Partner's Signature:	
Date signed:	City/State where signed: