

PUPPY APPLICATION

CONTACT INFORMATION

ApplicantName*			
Address *			
City *	State *	Zip *	
Primary Phone *			
Secondary Phone			
Email Address *			
FAMILY AND HOUSING			
How many people live in your household?			
Are they in agreement about adopting a dog?	*		
Is your yard fenced and Can you provide adec to run and play outside daily? *	-	- · ·	puppy –
Does anyone in the family have a known aller	gy to dogs? *		_
What other pets do you have (specify type and			_
Are they compatible with other animals? *			_
PUPPY WISH LIST			

Please mark which you are most interested in *

- 🛛 Pet
- □ Licensed Therapy/Service
- □ Hunting
- □ Agility

Please give details on the preferred size, color, gender, and coat type of your future puppy (i.e. curly, sable, male FI Bernedoodle). * _____

DAILY ROUTINE AND CARE

Do you agree to provide regular health care by a Licensed Veterinarian?

□ Yes □ No

Do you agree to keep this dog as an indoor dog?

□ Yes □ No

Do you agree to bring this dog to obedience or behavior training if necessary?*

□ Yes □ No

Do you agree to contact A Star is Born Doodles if you can no longer keep this dog, and agree to never resell your dog or surrender your dog to a shelter?*



Do you agree to spay or neuter your puppy at I year of age to allow for optimal health?*

□ Yes □ No

All of the information I have given is true and complete. This dog will reside in my home as a pet or domestic service animal only. I will provide quality dog food, plenty of fresh water, indoor shelter, affection, and regular physical examination and vaccinations under the supervision of a licensed Veterinarian. I agree to send a down payment in the amount of \$500 to to reserve a puppy. I understand that the down payment will be applied to the total purchase price of the puppy. If I decide not to select a puppy from this litter (Date of Litter_____) my deposit will be held by the breeder and applied to a selection from a future litter.

Disclaimer: this information is voluntary and completely confidential. We will use this information for professional records, and to contact you only.

Signature *	 	
Date *		

Please email this application to puppies@astarisborndoodles.com or call for mailing address. 517-414-0444