



Puppy Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () E-mail Address: _____
Color/sex of puppy desired:

Do you want your puppy cropped? YES NO If yes, have you ever posted ears? YES NO

Have you ever owned a Doberman? YES NO If yes, when?

Do you have children? YES NO

Ages?

Additional Information

What additional information would you like to tell us about you/ your family/ your pets?

References

Please list two personal references and a Veterinary reference.

Full Name: _____ Relationship: _____
Email: _____ Phone: () _____
Address: _____

Full Name: _____ Relationship: _____
Email: _____ Phone: () _____
Address: _____

Full Name: _____ Relationship: **Veterinarian**
Clinic: _____ Phone: () _____
Address: _____

Puppy Environment

Do you have a fenced yard? (describe) If not, how will your puppy be exercised?

Where will the puppy be housed at night?

Where will the puppy be housed during the day?

Do you own your home?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, does your insurance allow Dobermans?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If not, do you have permission to have a Doberman?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, describe?		

Why do you want a Masaya Doberman?

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What types of activities do you anticipate enjoying with your Doberman? (walking, jogging, schutzhund, obedience etc) :

What Doberman qualities are most important to you?

If you are interested in purchasing a performance dobe, what club/trainer will you be training with?

Have you ever titled a dog? (describe) :

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____