**Please complete the application and attach it in an email to me at:** **goodlifegr@aol.com** **– Thank you**

**1. Your first and last name:**

**Your Occupation:**

**2. Your Spouse/Partner's first and last name:**

**Your Spouse/Partner's Occupation:**

**3. Email:**

**4. Address:**

**5. City: 6. State: 7. Zip Code:**

**8. Home Phone:**

**9. Cell Phone:**

**10. Names and ages of children:**

**11. How did you hear about Goodlife Goldens?**

**12. Have you owned a golden before? Yes No**

**13. Which gender do you prefer? Male Female**

**and why?**

**14. If your first choice (Male or Female) is not available would you want a puppy of the opposite gender? Yes No**

**15. If we do not have what you are looking for, would you like to be added to the waiting list on a future litter? Yes No**

**16. What is or are the most important reason(s) for purchasing a Golden:**

**Family Companion? Yes or No**

**Pet Therapy? Yes or No**

**Show Dog? Yes or No**

**Obedience Competition? Yes or No**

**Breeding? Yes or No**

**17. If you have other pets please describe breed, spayed/neutered, and ages of each.**

**18. Do you live in an apartment, house, townhouse?**

**19. If you rent, do you have your landlord's permission to have a dog?**

**20. Is your home one story or two? If two stories, is it possible to raise the puppy for 18 months with limited stair climbing?**

**21. Please describe the yard/property and fencing you have:**

**22. Please describe the personality you prefer i.e. couch potato, moderately active, very active, independent, etc.**

**23. Please describe the kind of floor surfaces you have in your home.**

**24. How often will the puppy be alone and will someone be home with him/her during the day?**

**25. Will your puppy be primarily a house pet or outdoor dog?**

**26. Where will your puppy sleep at night?**

**27. Do you have or can you hire a puppy sitter/walker for any time puppy would be alone for more than a few hours? Yes or No**

**If yes, please give the puppy sitter’s name.**

**28. Who is or was your most recent veterinarian?**

**May I contact him / her as a reference on you? Yes or No**

**Telephone number?**

**29. Are you interested in learning about holistic veterinarians and alternative health care methods? Yes or No**

**30. Are you willing to provide vaccinations to this Golden according to Dr. W. Jean Dodds' vaccination protocols? She is a highly respected veterinarian immunologist and believes over vaccinations causes many health problems in dogs and cats. This is part of the Contract you and I will sign if you obtain one of my pups. Yes or No**

**31. When your puppy is between 3 - 6 months old are you willing to attend puppy socialization or training classes. Yes or No**

**32. Do you fully understand that the puppy must be neutered or spayed between 18-24 months, definitely no younger, and AKC registration papers will be for a Limited registration, unless you and I execute a written and signed agreement saying otherwise? Yes or No**

**Limited registration means the puppy/dog may be shown in all AKC venues except Conformation and the offspring cannot be registered with AKC. Limited Registration also means, you contractually agree not to breed this Golden without my written permission.**

**Is there any other information you'd like to share?**