

Adoption Form

golden retrievers /						PUP	PY GUARDIAN ADULT
Please help us know you better to place the best-suited puppy in your home!						Toda	ay's Date
Owner's information							
Surname (primary caregiver)	rrname (primary caregiver) First Name			Email Cell			Phone
Surname (secondary caregiver) First Name				Email	Cell Phone		
Residential Address				Zip/ Postal Co	de Home Phone		
City	State/ Province			Country	country		st International Airport (if shipping)
What type of home do you live in? Is your yard fenced?				Do you:			
House Apartment/ Condo Fenced Unfenced				No yard Acreage Own Rent			Rent
Occupation (Primary caregiver)			Но	urs away from h	rom home Part Time Full Time		
Occupation (Secondary caregiver)			Но	urs away from h	om home Part Time Full Time		
Who would look after your dog during this time	ie?						
How many live in residence? Ages of children Adult Ages 20 - 30 yrs 31 - 40 yrs 41 - 50 yrs 51 - 65 yrs 66 - 75 yrs 76 yrs							
Tell us about your lifestyle and what types of	activities you	and your fam	ily enj	oy.			
Pet information							
Preferred gender of puppy?	Female	Either		Food fed? K	iibble Fresh Ra	w Food	Other
Have you owned dog(s) before? Yes \[\]	No Have	you owned a	Golde	en before?	es 🗌 No	Do you h	nave a cat? Yes No
Tell us about your other pets (Name, Breed, Age, Sex, Altered, vaccinated etc.)				How long ha		has it bee	n since you owned a puppy?
					What attracted you to a Golden?		
How do you plan on training your golden?							
Where will your new dog stay when you are not at home?							
Where will your dog sleep at night? Loose in the house Crated Garage Kitchen Other							
How would you deal with your puppy chewing	g, crying at nig	ght, and hous	ebreal	king?			
How did you hear about Regalgoldens?	Website [Friends		Breeder	referral	_ □ско	C Other
References							
Veterinary Clinic Name			ame o	of Vet			Clinic phone
Personal reference 1					Phone		
Personal reference 2					Phone		