

# The Paw Pad Doodles

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## Doodle Application

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

How did you find us? \_\_\_\_\_

When are you hoping to adopt a puppy? \_\_\_\_\_ of 20\_\_\_\_\_

What gender do you want? Boy\_\_\_ Girl\_\_\_ Either\_\_\_

What size of a doodle do you feel best fits your family and lifestyle?

Toy (10-20lbs) \_\_\_\_\_ Mini (25-35lbs)\_\_\_\_\_ Medium (38-55lbs) \_\_\_\_\_ Standard (55-90+lbs) \_\_\_\_\_

Explain: \_\_\_\_\_

What color do you prefer? (circle all that apply)

No preference      White/Cream      Apricot      Red      Black  
Chocolate      Golden      Chocolate & White Parti  
Black & White Parti      Apricot & White Parti

Does everyone in your family want a new puppy? Yes \_\_\_\_\_ No \_\_\_\_\_

Does anyone in your family suffer from pet allergies? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, how severe? \_\_\_\_\_

Do you have children? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please provide ages: \_\_\_\_\_

Will this be your family's first dog? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you currently own a dog? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please provide the following information:

Age \_\_\_\_\_ Breed \_\_\_\_\_ Is he/she neutered/spayed? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any other pets? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please explain \_\_\_\_\_  
Do you have a fenced-in yard? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what type of a fence? \_\_\_\_\_

Will the puppy be home alone? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how many hours a day? \_\_\_\_\_

*\*Puppies need to be taken out for a mid-day break and playtime. Puppies eat 3 times a day for the first 4 months.*

Will you crate train? (highly recommended) Yes \_\_\_\_\_ No \_\_\_\_\_

Are you aware of the time and energy needed to care for a young puppy and are you willing and able to accept that responsibility? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have the financial means to cover the costs of a new puppy? (Puppy shots, monthly heart-worm medication, annual vaccinations, crate, bedding, food, toys, grooming products, etc.) Yes \_\_\_\_\_ No \_\_\_\_\_

Are you committed to caring for this puppy for it's lifetime? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you be attending an obedience class with your puppy? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you be reserving a space in our potty training program for your puppy before he/she goes home? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the name and phone number of the veterinarian or clinic you will be using for the puppy?

\_\_\_\_\_ Phone \_\_\_\_\_

Have you used this veterinarian and/or clinic in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

May we contact them for a reference? Yes \_\_\_\_\_ No \_\_\_\_\_

At The Paw Pad Goldendoodles, Inc., we require that the puppy/dog be returned to us -at any age - if you are unable to care for the dog. We never want one of our dogs to end up in a shelter or somewhere he/she is not wanted. We will work with you, if you have the perfect new home in mind for your puppy. We want to know that the dog has been re-homed so the new owner knows we will always take them back and re-home if needed. There is no refund for a puppy that is returned unless it is within the terms of the contract.

Do you agree to notify The Paw Pad Goldendoodles, Inc. first if you can no longer keep your doodle? Yes \_\_\_\_\_ No \_\_\_\_\_

All of our puppies are sold on a strict non-breeding spay/neuter contract. We do not allow our pet puppies to be used for breeding.

Do you agree to spay or neuter your puppy by 9 months of age? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_

*I have answered all of the above questions truthfully. I understand that if any intentionally false answers have been given, The Paw Pad Goldendoodles, Inc. reserves the right not to sell to me. By signing below, I agree to the re-home and spay or neuter policy as explained above and on the health warranty and contract.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ \*Include signed copy with payment