Adoption Form

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| Owners Information |  |  | Date: |  |

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| First and Last name: Primary Caregiver: | First and Last name: Secondary Caregiver: |  |  |
| Residential Address: | City: |  |  |
| State/ Province | Zip/ Postal Code | Country: |  |  |
| Cell Phone: | Home Phone: | Email: |  |  |

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| Type of Home: | Size of yard: | Fenced or not: |
| Closest Airport if shipping: |

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| Occupations: | Hours away from home: | Full or Part time: |
| Who will look after your pet during this time: |
| Children living at home: | Children’s ages: | Adult ages: |
| Tell me about your lifestyle and type of Golden you are looking for:  |

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| Have you owned a dog before: | Have you owned a Golden before: | Another dog breeds:  |
| What happened to your previous dog(s): |
| How did you hear about Regal Goldens: |

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|  Other information: |

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| Pet Information |  |  |

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| Preferred Gender of Puppy: | How will you train your puppy: |
| What type of Temperament are you looking for – High, medium or low energy: |

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| Where will your dog stay when you are not at home: |
| Where will you dog sleep at night: | Will you crate train your dog: |

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| Other Information: |

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| References |  |  |

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| Vet Clinic:  | Vet Name: | Phone: |
| Personal: | Relationship: | Phone: |
| Personal: | Relationship: | Phone |

*ALL puppies are sold with a Non-Breeding CKC registration and a non-breeding agreement.*