



Adams Ranch ACDs does not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. However, we do reserve the right to deny you purchase of one of our cattle dogs, products and/or services.

The purpose of this questionnaire is to obtain information about you and your family to be able to best match you with the puppy that will best suit your desires and needs. My intent is to place my puppies in their new homes forever. If you are a veteran herding/working dog or a dog sports competitor please let me know prior to completing this questionnaire.

First, we would like to thank you for choosing Adams Ranch ACDs and congratulations on your decision to invest in a purebred Australian Cattle Dog (ACD)! In our breeding program, the required and most recommended health testing has been on the parents of our puppies. Our policy is to do our best to produce puppies that are within the breed standard in type and temperament. We do our best to provide our customers with dogs that will have the best possibility of living long, sound, healthy lives . We carefully analyze the genetics, pedigrees, and structural qualities of each potential parent prior to breeding. We pride ourselves on matching pairs that will complement each other to complement one another, the offspring and the ACD breed. The genetics are very important! Healthy dogs make happy families. I hope to be able to match you with your next family member to create many years of memories. with.

Please answer all questions honestly. There are no right or wrong answers. I will review the applications, and create a list of prospective puppy parents from this questionnaire, so please fill it out completely.

Thank you again for choosing Adams Ranch ACDs. We look forward to making you an addition to our ACD (Australian Cattle Dog) family.

Once you complete your Puppy Application you can email it to [acdmom1025@netzero.net](mailto:acdmom1025@netzero.net) as an attachment or copy and paste it in the email message. Please do not hesitate to contact us with any questions.



## Puppy Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Occupation: \_\_\_\_\_

### Spouse/ Partner's Information (if any)

Full Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Occupation: \_\_\_\_\_

### Children

Number of Children living at home (if any) and ages: \_\_\_\_\_

### Preferences

#### Preferences (if possible)

Sex: Male  Female  (Check one)

Color: Red  Blue  No Preference  (Check one)

Facial markings: No Mask  Full Mask  Eye Patch  No Preference



**Puppy Questionnaire**

1. Did you do your homework? YES  NO  (Choose one) What did you learn:

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2. Why did you choose an ACD for your next puppy?

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3. Have you ever owned an Australian Cattle dog before? YES  NO  (Check one)

4. Have you ever owned a herding group or working dog? YES  NO  (Check one)

5. If so, what type of breed: \_\_\_\_\_

6. Have you personally owned and raised a puppy on your own before? YES  NO  (Check one)

7. If so, please fill out information below:

8. What Breed(s):

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9. From what age: \_\_\_\_\_ To what age: \_\_\_\_\_

10. How would you describe the way you raised your puppy? \_\_\_\_\_

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11. For what purpose(s) are you purchasing an Australian Cattle Dogs (ACD) from us?

12. \_\_\_\_\_

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13. What type of character and personality traits are you looking for in your puppy?

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14. Do you own or rent or own your primary residence? Rent  Own  For how long? \_\_\_\_\_ years



15. Do you have an enclosed fenced-in yard where you intend to allow your puppy to play or potty?

YES  NO  (Check one)

16. What type of home do you live in? (Please check one below)

a.  Single Family,  Condo,  Town Home,  Other explain) \_\_\_\_\_

b. Square footage of home: \_\_\_\_\_

c. Property size: \_\_\_\_\_ Fenced portion: \_\_\_\_\_

17. Briefly describe the area you live in and your surroundings.

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18. Have you ever crate-trained a puppy or dog? YES  NO  (Check one)

19. Do you intend to crate-train the puppy you purchase from us? YES  NO  (Check one)

a. If yes, do you already have one? YES  NO  (Check one)

b. If yes, what size is it? Small  Medium  Large  X-Large  Other  (explain below)

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20. Do you plan to spay or neuter your puppy? (after 18 months). YES  NO  (Check one)

21. Who is the primary person that will train and care for the puppy?

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22. Will others help with the training and caring of the puppy? YES  NO  (Check one)

If yes, who? \_\_\_\_\_

23. Do you intend to take your puppy to obedience classes to help he or she become an enjoyable companion and an integral part of your family? YES  NO  (Check one)

24. Please describe where the puppy will be during the day?

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25. Please describe where the puppy will be during the night?

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26. Will someone be home the majority of the day to housetrain the puppy? YES  NO  (Check one)

If not, what kind of arrangements do you intend to make? \_\_\_\_\_



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27. Is there anyone in your family afraid of dogs? YES  NO  (Check one) If yes, please explain why.

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28. Have you or anyone in your household ever been bitten by a dog before that required police report and/or medical attention? YES  NO  (Check one) If yes, briefly explain.

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29. Are you familiar with Limited vs. Full registration? YES  NO  (Check one)

30. Have you ever competed in AKC or other club events? YES  NO  (Check one)

31. Did you complete an AKC Title(s)? If so, please list them:

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32. Does your household have any other pets living in it? YES  NO  (Check one) If yes, please list them (Include species, breed, gender, and age).

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33. Is there anything else you would like to add regarding you and/or your family that can help us place the right puppy with you? YES  NO  (Check one) If yes, please feel free to share with us.

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34. Please provide two references (personal and veterinarian). Please contact these references to let them know they may be contacted for a reference and give them permission to speak to me.



**Personal References:**

**35. Veterinarian or second Personal Reference:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_