

NEW OWNER APPLICATION

APPI	LICANT #1			
Full N	Name			
Home	e Phone			
Phon	e			
Work	Phone			
Emai	I			
Address				
City,	State, Zip			
ΔΡΡΙ	LICANT #2			
Full N				
	e Phone			
Phon	e			
	: Phone			
Emai	l	·		
Address				
City, State, Zip				
	ionship to Applicant #1			
Interested in				
	MALE	FEMALE DON'T CARE		
	SHOW	PET/COMPANION DON'T CARE		
Coat Color				
	RED WHEATEN	MEDIUM WHEATEN		
	LIGHT WHEATEN	DON'T CARE		
Nose Color				
	LIVER	BLACK		
Would you be interested in a Ridgeless puppy?				
	YES NO	NOT SURE		

Briefly explain how you became interested in Rhodesian Ridgebacks:				
What townseement and helpovious twaits do you expect from this broad?				
What temperament and behavior traits do you expect from this breed?				
Please indicate all attributes for wanting a Rhodesian Ridgeback puppy (check all that apply):				
Agility/Obedience Competition				
Family Pet/Companion				
Hunting				
Lure Coursing				
Plays well with other dogs				
Playing with family/friends				
Playing with toys				
Protection/Guarding				
Showing/Breading				
Trainability				
Other (describe)				
If you purchase a "Show Puppy", will you agree to the breeder or other qualified person showing/handling the dog for you? This may include transporting the dog to/from the breeder/handler for shows, and may incur additional costs (fees, travel).				
YES NO NOT SURE				
Do you own or rent your residence?				
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OWN RENT				
If renting, do you have landlord's approval for a large dog?				
YESNO				
Type of residence you live in:				
HOUSE				
CONDO/APARTMENT				
OTHER (DESCRIBE):				

Is there a yard? Is the yard fenced? How tall is the fence? Describe:
Do you have a pool? If so, is it fenced?
YESNO
Do you have children? What are their ages?
Have you ever owned a dog or pet before? Briefly describe them and include all pets currently in the home:
Who will be the primary caretaker of this puppy?
Briefly describe where the puppy will stay during the day, and at night:
If the puppy is alone during the day or overnight (for work, school, etc), explain how someone will feed, visit, and exercise him during your absence:
Do you plan to attend basic Obedience classes? Or other training (i.e., agility, protection, show handling, therapy, etc.)?

Do you plan to crate train your puppy?					
YES	NO NOT SURE				
What is the name of your veterinarian? (If you do not have one, now is the time to look, or ask us for a referral)					
Vet Name					
Phone					
Address or City					
How did you hear about Kohana Ridgebacks?					
Please list two references, people who can vouch for the suitability of you and your home, and how you care for your pets. Only one family member can be included.					
REFERENCE 1:					
NAME					
ADDRESS					
PHONE					
EMAIL					
REFERENCE 2:					
NAME					
ADDRESS					
PHONE					
EMAIL					
Please add any additional information you would like to share:					

- 1. To view a sample Puppy Contract, please visit http://www.kohanaridgebacks.com/puppy-contract These are sample contracts only, Kohana Ridgebacks reserves the right to edit conditions of contract as necessary.
- 2. The Kohana Ridgebacks Puppy Sales Contract will require the puppy to be returned if an owner can longer care for it. Selling, giving away, or gifting the dog is not allowed without express written permission of Kohana Ridgebacks.

- 3. We require all puppy owners to keep in touch with us throughout the life of the puppy. If moving residences, Kohana Ridgebacks must be notified within 14 days of the change of address and telephone number.
- 4. All Pet/Companion Puppies must be spayed/neutered at the appropriate age as stated in the sales contract, unless terms are expressly written and agreed upon in the contract.
- 5. Kohana Ridgebacks reserve the right to place puppies on a co-ownership basis and/or with limited registration.

Signing this application indicates that you, as applicant and/or co-applicant, agree to these contractual terms and are still interested in obtaining a puppy from Kohana Ridgebacks. Please sign below and submit this form electronically via email to kohanaridge@gmail.com

Applicant Name	Date
Signature	
Co-Applicant Name	Date
Signature	