**Australian Labradoodle Puppy Adoption Application**

***By submitting this application, the applicant acknowledges and agrees that the dog will be adopted with NO breeding rights and that the buyer will contractually commit to having the dog spayed/neutered by 8-months of age.***

Which litter are you interested in? (Mom’s name)

Your Name(s)

Address (Street Number, Street Name, City, State and Zip Code)

Email Address(es)

Cell Phone Number(s)

What Gender do you prefer? (Male, Female, No Preference)

What Color do you prefer, if any?

Do you have other pets at home? If so, please describe each of them and indicate whether they are spayed/neutered.

Will someone be at home with the puppy during the day until he/she is at least 6-months old? How will the puppy/dog be cared for during the day after 6-months of age?

How did you hear about us?

Please add any other comments and/or questions here (e.g. Let us know if you intend to train the dog for service or therapy)

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