

Cecil's Arizona Labradors

Thank you for your interest in one of our Labrador Retriever puppies! Please complete this application to help us ensure our puppies are placed in responsible, loving homes.

Personal Information

Full Name: _____

Phone Number: _____

Email Address: _____

Address: _____

City, State, Zip: _____

Household Information

1. Do you own or rent your home?

Own

Rent (If renting, do you have landlord approval? [] Yes [] No)

2. Do you have a fenced yard?

Yes

No (If no, how do you plan to exercise your dog?)

3. How many people live in your household?

Adults: _____

Children (ages): _____

4. Does anyone in your home have allergies to dogs?

Yes

No

5. Do all household members agree to getting a Labrador Retriever?

- Yes
- No

Pet Experience

6. Have you owned a Labrador Retriever before?

- Yes
- No

7. Do you currently own any pets?

- Yes (Please list breed, age, and temperament)

- No

8. Have you ever rehomed or surrendered a pet?

- Yes, please explain:

- No

9. Do you have a veterinarian?

- Yes (Vet Name & Contact:)

- No

Lifestyle & Preferences

10. What is your activity level?

- Very Active (Hiking, running, etc.)
- Moderately Active (Daily walks, weekend outings)

Relaxed (Short walks, mostly indoor time)

11. What is your primary reason for getting a Labrador Retriever?

- Family Pet
- Hunting Companion
- Service or Therapy Dog
- Breeding
- Other (Explain: _____)

12. Are you interested in a specific gender?

- Male
- Female
- No Preference

13. Do you have a preferred coat color?

- Yellow
- Chocolate
- Black
- No Preference

14. Are you looking for a particular temperament or personality traits?

Commitment & Care

15. Puppies require consistent training, socialization, and time. Do you have time to properly train and care for a new puppy?

- Yes
- No

16. How do you plan to train your Labrador Retriever?

- Puppy classes
- Self-training
- Professional Trainer

17. Where will the dog sleep at night? _____

18. How many hours a day will the puppy be left alone? _____
19. What will you do if you can no longer keep the dog? _____
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Final Steps

Would you like to be placed on our waiting list if no puppies are currently available?

- Yes
 No

Are you interested in our first responder, nurse, or military discount?

- Yes
 No

Do you have any additional questions for us?

We love to see pictures of you and your pet(s). If you have any please send them with this application. You can expect to hear back from us within a week of your application submission.

By signing below, you acknowledge that this application is for screening purposes and does not guarantee the placement of a puppy.

Signature: _____ Date: _____