

Eastern Star Akitas  
3645 Middle Urbana Rd.  
Urbana, Ohio 43078  
(937) 484-5911

## Eastern Star Puppy Questionnaire

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

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

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

How were you referred to us? \_\_\_\_\_

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

How many adults are in your household? \_\_\_\_\_

How many children? (Please list the ages of children). \_\_\_\_\_

Is anyone at home during the day to care for pup? If not, can someone exercise & feed the pup midday? \_\_\_\_\_

Do you have a fenced yard? Yes \_\_\_ or No \_\_\_ If your answer is no, are you willing to either fence or put up a suitable kennel for your dog? \_\_\_\_\_

Do you currently own any other pets? If so, please list them. \_\_\_\_\_

Have you previously owned other dogs? Please list them. \_\_\_\_\_

What is your primary reason for wanting an Akita? \_\_\_\_\_

Will this puppy be a companion or show prospect? Obedience/ Agility prospect? Other? \_\_\_\_\_

Where will your dog live? House? Kennel run? Both? Other [describe]? \_\_\_\_\_

Do all family members want a new puppy? Yes \_\_\_ or No \_\_\_ \_\_\_\_\_

Do any family members have allergies to dogs? Yes \_\_\_ or No \_\_\_ \_\_\_\_\_

Who will be the primary trainer/care giver for this puppy? \_\_\_\_\_

Are you willing to take this puppy to Puppy Kindergarten & Obedience Classes, & to otherwise make the effort required to properly socialize a young puppy? Yes \_\_\_ or No \_\_\_

Are you willing to purchase and use a dog crate for training / housebreaking purposes? Yes \_\_\_ or No \_\_\_

What kind of personality do you like in dogs? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What traits do you dislike in dogs? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you prefer male, female, or no preference? \_\_\_\_\_

Do you have specific color or marking preferences? \_\_\_\_\_

\_\_\_\_\_

Are you committed to and prepared to taking care of this dog's needs for his or her entire life?

Yes \_\_\_ or No \_\_\_ \_\_\_\_\_

If you are not buying this dog specifically as a show dog, are you willing to neuter or spay him or her?

Yes \_\_\_ or No \_\_\_ If no, why not? \_\_\_\_\_

\_\_\_\_\_

Please provide the name of your veterinarian as a reference.

Name: \_\_\_\_\_ Ph #. \_\_\_\_\_

Applicants Signature \_\_\_\_\_

Date \_\_\_\_\_

Thank you for taking the time to complete our application.