

Guardian Home Questionnaire

Name: _____

Address: _____

Phone Number(S) _____

Email: _____

Age and Names of all member's in home _____

Fenced in Yard? Is the yard small, medium or large? _____

Would you consider your home small, medium or large? _____

Other Pets (list age, gender, species and breed) _____

How do you plan to exercise and train the puppy? _____

Veterinarian Information: _____

(Please contact your Veterinarian that we may be contacting them for information about your current or previous pets, this is required for all Guardian dogs.)

Do you own your Home or Rent? _____

Is your family active, quiet or in the middle? _____

When are you looking to Guardian? (Spring, Summer Fall) _____

Are you available/willing to travel whenever needed to bring the Guardian when requested?

Anything else you would like us to know about you and your family?

Please fill out questionnaire and return to us. If you have any questions call Robin at (330) 620-8305