



Home Raised with Love

Pre-Adoption Application for Puppies

This Pre-Adoption form asks questions to help you and **Abba's Shilohs** decide if a Shiloh Shepherd is the right breed for you. It will help us to select the right puppy for you; we observe the puppies' behaviors, personalities and temperaments. The information on this form helps us to get to know a little bit about you. We urge you to be very honest with us about yourself and your home life, as the main goal is to find suitable homes for our puppies. One puppy may be perfect in a busy household, while another may panic and need a quiet home. Shiloh Shepherds truly have their own personalities.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

E-Mail Address: _____

Please take your time answering the following questions and place a check mark on the appropriate lines and answer all the questions. Give us as much information as possible; if you need more room, please use the back of this form (label with the correct question number)

1. In what type of housing do you reside? Apt/Condo Single family Townhouse
2. Do you live: In town In the country In the suburbs On a farm
3. Do you Own Rent
If you rent, does your landlord permit dogs? Yes No
Would you permit us to contact your landlord? Yes No
Landlord's name and phone number: _____
4. Do you have a fenced yard? Yes, height _____ (in feet) No
Are you able to leash walk your dog at least 4 times daily for necessary functions?
 Yes No, why not? _____
5. My household consists of: _____ Adults _____ children _____ dogs _____ cats _____ other
My children are ages: _____ Adults are ages _____
My dogs are (list age, sex, and breed) _____
6. I have owned _____ dogs in the past _____ years.
7. My dogs were: given away killed in accidents died of old age, euthanasia
Because _____
Other reasons: _____
8. Does anyone in the household have allergies? No Yes, what type?

9. _____ Do you expect to have children? Yes No

10. Do you have a person living in the household that is: Elderly Handicapped has special needs

11. I am interested in a pet and plan to spay/neuter: Yes No

12. I am interested in showing and/or breeding: Yes No

13. I am interested in training my dog in: Obedience Agility Search and Rescue
Therapy/Assistance Schutzhund Herding Other

14. My dog will spend most of his/her time: in the house in a fenced yard in a kennel run on a
leash/chain loose

15. The temperament I expect from my dog, as per the following possibilities would be:

_____ The mailman knocks at the door with a package delivery, I want my dog to:

bark, then make friends bark, and not make friends bark and chew him up

other, please explain _____

16. I would like a: Male Female Either

17. I would like a: Plush coat Smooth coat Either

18. I would like a: Sable Dual White Black Not sure Doesn't matter

19. Which family member will have the major responsibility for the dog? _____

20. How many hours a day would the dog be left alone? _____

21. If necessary, are you willing to crate train your Shiloh? _____

22. Do you agree to return your Shiloh to us at Abba's Shilohs if you are unable to keep it? Yes No

23. Are you willing to keep the dog up to date on all of its vaccines, screen for heartworm, use heartworm
preventative, and use flea preventative? Yes No

24. Are you willing to: pay shipping charges on this dog pick up personally

25. Are you willing to have your dog seen by a vet at least once a year? Yes No

26. Are you willing to license your dog, keep it properly identified and abide by your state and local laws
concerning dog ownership? Yes No

27. Are you willing to provide us with the follow up reports as needed? Yes No

28. Who is your Veterinarian? _____

Address _____

Phone number (_____) _____

29. Please list 3 references (2, if you would like to count the Veterinarian). Please include complete names, addresses, and telephone numbers.

A. _____

B. _____

C. _____

By signing this application, I (we) authorize the Veterinarian listed on this application to release information to Abba's Shilohs.

Applicant's signature: _____ Date: _____

Applicant's signature: _____ Date: _____

If you would like to be added to our list for a puppy, a deposit of \$500.00 will be required. Please make your check payable to Michelle Wirrell. Feel free to contact us for more information at michelle@abbashilohs.com Thank you for your cooperation.

Any questions or comments you may have can be included on this application. You can also email or call us at (540) 955-4180, or write to Abba's Shilohs c/o Michelle Wirrell, 374 Laurel Lane, Bluemont, Virginia 20135