



MONTEIRA AIRES DALES

(406) 892-3852

Judy Howell
7348 HWY 2 E
Columbia Falls, Mt. 59912
montana002@centurytel.net
<http://monterraairedales.com>

PLACEMENT QUESTIONNAIRE

YOUR NAME: _____ DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: HOME: _____ WORK: _____

CELL: _____ FAX: _____

EMAIL?: _____ BEST TIME TO CALL? _____

REFERRED BY/HOW DID YOU FIND US ?

PLEASE LIST ALL THE PEOPLE IN YOUR HOME, THEIR AGES AND OCCUPATIONS:

ARE YOU INTERESTED IN A PUPPY? _____ ADULT? _____ MALE FEMALE.....N/A

SIZE/STRUCTURE PREFERENCE? LARGE.....MEDIUM.....SMALL.....N/A

WHAT do you want your AIRES DALE to be/do? PET/FAMILY

COMPANION....PROTECTION..OBEDIENCE/AGILITY/TRACKING....HUNTING....

CONFORMATION...OTHER? _____

ARE YOU CONSIDERING BREEDING? _____

WHAT QUALITIES ABOUT THE AIRES DALE DO YOU LIKE? _____

WHAT DON'T YOU WANT YOUR AIRES DALE TO BE? _____

ARE YOU AWARE OF THE GROOMING AND EXERCISE REQUIREMENTS OF THE AIRES DALE AND THOUGHT ABOUT HOW TO PROVIDE THESE? _____

HAVE YOU OWNED OTHER AIRES DALES OR OTHER DOGS? _____

WHAT HAPPENED TO THEM? _____

WILL YOU BE COMITTED TO YOUR NEW AIREDALE FOR IT'S LIFETIME? _____

ARE YOU WILLING TO SPAY/NEUTER THIS DOG? _____ IF NOT, WHY? _____

WHO WILL BE PRIMARY CARETAKER OF THIS DOG? _____

ARE YOU PLANNING ON OBEDIENCE TRAINING FOR THIS DOG? _____

ARE YOU AWARE OF THE ADVANTAGES OF CRATE TRAINING YOUR DOG? _____

HAVE YOU READ BOOKS ABOUT THE AIREDALE? _____

OTHER BOOKS ON DOG CARE AND TRAINING? _____

DO YOU AGREE TO RETURN THE DOG, OR CONSULT WITH US, IF YOU MUST GIVE UP THE DOG FOR ANY REASON? _____

HOW DO ANY OTHER PEOPLE IN THE HOUSEHOLD FEEL ABOUT HAVING AN AIREDALE?

HOW LONG WILL THE DOG BE LEFT HOME ALONE? _____

WHERE WILL THE DOG STAY DURING THE DAY? _____

AT NIGHT? _____

WHAT WILL YOU DO WITH YOUR DOG WHEN YOU ARE TRAVELLING/VACATIONING, ETC? _____

DO YOU HAVE A FENCED YARD OR KENNEL ENCLOSURE FOR THE DOG'S SAFETY?

DO YOUOWN.....or..... RENT.....YOUR HOME?

URBAN.....SUBURBAN.....RURAL?.....

REFERENCES:

VETERINARIAN _____

OTHER: (NAME, ADDRESS, TELEPHONE #)

THANK YOU!...please feel free to use back or add other sheets for additional information you would like to provide