



HHP Bloodhounds Puppy Questionnaire

Name _____

Address _____ City _____

State _____ Zip code _____

Home Phone _____

E-mail address _____

Occupation _____

Have you ever owned a bloodhound? If so, when? _____

Do you prefer a male or a female? _____

Are you willing to Spay/neuter your dog? _____

If not, why not?

What made you choose a bloodhound?

What type of temperament are you looking for?

Does everyone in the family agree to the purchase of a bloodhound? _____

Who will be the dog's main caretaker? _____

Do you have young children? _____

If so, what are their ages? _____

Do you have other pets in the household? _____

If so, what kind? If dogs, please list breed and age of each _____

Do you live in a house _____ Apartment _____ Other _____

Do you rent or own? _____

Do you have a securely fenced yard with a gate? _____

Do you have a dog run? _____ Do you own a crate? _____

Where will your bloodhound be kept during the day? _____

Where will your bloodhound sleep at night? _____

For what purpose do you wish to purchase a bloodhound? Family pet _____ Show _____

Obedience/ performance events _____ AKC Tracking _____

ABC Trailing _____ Search and rescue work _____

Other _____

Do you currently have a veterinarian? _____

If so, please include His/her name, address and phone number

How did you hear about HHP Bloodhounds? _____

Please list 2 personal references:

1. _____

2. _____

Please mail this form to:

HHP Bloodhounds
Paul and Karen Crary
434 CR 3621
Bridgeport, TX, 76426

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