



**CHRIMASO BOSTON TERRIERS**  
**PROSPECTIVE PUPPY/DOG**  
**BUYER APPLICATION**



**Each and every prospective puppy buyer is asked to fill out this questionnaire with honesty and openness, and then sign and return it. This will help me to determine whether a Boston Terrier is well suited for you and your lifestyle, as well as help me determine what traits you are seeking in a Boston Terrier puppy.**

Please fill in your name, address, phone number, and email address on the lines listed below. If you have a P.O. Box mailing address, please provide that IN ADDITION to your actual address where you reside.

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1. How did you hear about ChriMaso Boston Terriers?

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2. Are you interested in a  Puppy,  Adolescent Dog, or  Adult Dog? (check all that apply)

3. Would you be interested in a “rescue” dog if there was one available that met your needs?  
 Yes  No

4. Will this be your first Great Boston Terrier?  Yes  No

5. If yes, have you researched the Boston Terrier breed?  Yes  No

6. What kind of research was done? Pick all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Website Searches | <input type="checkbox"/> Television          |
| <input type="checkbox"/> Friends/Family   | <input type="checkbox"/> Movies              |
| <input type="checkbox"/> Books            | <input type="checkbox"/> Dog Shows           |
| <input type="checkbox"/> Magazines        | <input type="checkbox"/> Breeders/Exhibitors |
| <input type="checkbox"/> Other _____      |  |

7. If no to #4 above, list how many, the age(s), and the registered names of each of your dogs. Also describe how they were acquired.

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8. Please list names/species/breeds of other pets you have previously owned. Did they die?  
 Yes  No If yes, at what age and what circumstances? Did you have to sell,  
 place, or give them away?  Yes  No. If so, why?

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9. What pets do you currently own? Please list species/breed/age and whether or not they  
 are intact or spayed/neutered. \_\_\_\_\_

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10. Give a brief description of your house.

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11. Do you own or rent your house?  Rent  Own

12. If renting, has your landlord approved your getting a Boston Terrier puppy?  
 Yes  No Please provide Landlord's name & phone number:

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13. Describe your yard. \_\_\_\_\_

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14. Is your yard fenced?  Yes  No If yes, what type of fencing and how tall?

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15. List the names, ages, and relationship of those family members (or others) that live in  
 your house.

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16. Is everyone in your house in agreement to get a new dog?  Yes  No  
 If no, please explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
17. Will you agree to sign a contract that states you promise to take your puppy to at least puppy kindergarten/beginning obedience class, and show proof of graduation?  
 Yes  No
18. Will you agree to feed **ONLY** a high quality ADULT formula dog food from the list of approved dog foods I will provide?  Yes  No?
19. Will you agree to follow my puppy vaccination schedule and then do the first year booster and then choose to do either annual boosters or titers or bi-annual boosters? (You and your veterinarian can decide what course you would like to follow).  Yes  No
20. Will you agree to take your Boston Terrier puppy to the vet whenever he/she shows signs of illness, lameness, pain, or any other problem?  Yes  No
21. Are you aware of the health issues that are known to exist in Boston Terriers such as deafness, cataracts, bad knees (patellas), cardiac problems, etc.?  
 Yes  No
22. Will you promise to keep me informed of any health or medical conditions that occur with your puppy whether good or bad?  Yes  No
23. Where will your puppy stay during the daytime? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
24. Will someone be home with your puppy during the daytime?  Yes  No  
 If so, who? \_\_\_\_\_
25. If your puppy must be left alone during the daytime because of work schedule, are you willing to come home mid-day for a visit or pay for a daytime insured pet sitter/walker until your puppy is 9 months old?  Yes  No
26. Will you agree to confine your puppy to a crate, indoor exercise pen, or puppy-proofed room so that he or she is protected from eating inanimate objects when you are not supervising him/her until he/she can be trusted?  Yes  No



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27. If you do not crate train, how do you plan to protect your puppy from getting into something he/she should not while you are not home? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

28. Will you agree to not crate your puppy for any consecutive period longer than 4 hours at a time, and not to exceed a total of 10 hours in a 24-hour period?  
 Yes  No If no, please explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

29. Where will your puppy sleep at night? \_\_\_\_\_

30. Do you agree to allow your puppy to have several short periods of playtime **each and every day**, and to follow my advice as to what kinds of play are appropriate and not appropriate?  Yes  No

31. Do you agree to use positive training methods rather than screaming, yelling, slapping, or hitting your puppy, unless you are yelling to prevent your puppy from immediate danger?  
 Yes  No

32. Do you agree to take your puppy to a group obedience class that is taught by a trainer that believes only in positive reinforcement and not punishment?  
 Yes  No

33. Do you agree that your puppy is not to have any kind of training in guarding, attacking, or fighting?  Yes  No

34. Which member of your family will be primarily involved in the training of your puppy?  
 \_\_\_\_\_

35. Do you agree to follow normal grooming and general care of your puppy, to include regular nail trimming/grinding, teeth cleaning, ear cleaning, brushing, and bathing only when needed?  Yes  No

36. Do you agree to not let your puppy run or play on slick surfaces such as linoleum, tile flooring, ice, and wood flooring on a day to day basis until he/she is 24 months of age?  
 Yes  No And limit stair climbing to supervision only until he/she is 12 months old?  Yes  No



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37. Do you agree to provide your puppy with thick, soft bedding while he/she is resting or sleeping?  Yes  No. What kind of bedding will you use?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
38. What kind of vehicle do you drive? \_\_\_\_\_
39. Where will your puppy ride in your vehicle now and as it grows? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
40. Do you agree to never let your puppy ride in an open bed pick – up truck or open-bowed powerboat?  Yes  No
41. Do you agree to take your puppy out in your neighborhood, local pet store, park, etc. in addition to obedience classes to socialize your puppy often until he/she is at least 24 months old, but only after all of his/her puppy shot series are completed?  
 Yes  No
42. As you may be aware, Bostons are genetically predisposed to produce 60% males and only 40% females. Do you have a preference as to what gender your puppy will be?  
 Male  Female  No Preference If yes, what is the reason for your preference?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
43. Do you want a puppy to keep as a pet and companion only, or are you looking for a show potential puppy, or a dog/bitch for potential breeding purposes?  
 Pet/Companion  Show  Breeding Purposes
44. If purchasing a pet puppy, will you agree to spay/neuter your pet by 12 months of age and NOT breed the animal at all?  
 Yes  No If no, please explain:  
 \_\_\_\_\_  
 \_\_\_\_\_
45. If purchasing a show potential puppy, do you agree to the terms of the health testing, training, and other requirements listed in the contract?  Yes  No
46. If purchasing a show potential puppy, do agree to make every effort to finish the puppy to its championship, or notify me immediately if otherwise?  Yes  No



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47. What kind of temperament and personality are you looking for in your puppy? (For example, do you want an easy-going, laid back pup, or a more energetic, athletic pup)?

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56. If purchasing a show potential puppy, what characteristics are most important to you in this puppy? Please be as detailed and specific as possible.

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48. Before your puppy has completed his/her series of puppy vaccine series, do you agree to NOT expose your puppy to any other dogs or animals, except for the ones in your household, and to NOT take your puppy to pet stores, class, parks, walks outside of your yard?  Yes  No

49. Do you understand and agree that by contract you will not be permitted to re-sell or place your dog without giving me first right of refusal to take the puppy back, allowing me to make arrangements to get your dog back?  Yes  No

50. Please list the name, name of practice, address, and phone number of your veterinarian(s)

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51. Do I have your permission to call and speak to your veterinarian as a reference?  
 Yes  No

52. Please list the name, address, and phone number of at least two (2) other personal references

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53. Do I have your permission to call and speak to your references?  Yes  No

54. If you are out of state, do you agree to having a possible home visit arranged (with your consent, of course) from a chosen Boston Terrier acquaintance/fellow BTCA member before I agree to sell you a puppy? I may ask them to bring one of their Boston Terriers



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with them so that you can see what it is like to have a full grown Boston Terrier in your house. ☺  Yes  No

I, \_\_\_\_\_, have read and answered this questionnaire honestly and to the best of my ability. I understand that by answering these questions I am not guaranteed to purchase a puppy or to be put on the waiting list, and that the breeder, Pamela Preston, will contact me to let me know whether or not I will be accepted as a prospect. (All adults in the household must sign this application.)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**PLEASE MAIL TO:**

Pamela Preston  
P O Box 1773  
Shingle Springs, CA 95682-1773

Or email to:  
[puppies@chrimasobostons.com](mailto:puppies@chrimasobostons.com)