



CHRIMASO BOSTON TERRIERS  
PROSPECTIVE BUYER APPLICATION



**Each and every prospective puppy/dog buyer is asked to fill out this questionnaire with honesty and openness, and then sign and return it. This will help me to determine which puppy/dog is best 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.

Name(s): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 : \_\_\_\_\_  
 City, ST, Zip: \_\_\_\_\_  
 Phone No. (s): \_\_\_\_\_  
 Email Address: \_\_\_\_\_

1. How did you hear about ChriMaso Boston Terriers?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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. Would you like me to share your contact information with other reputable breeders if I am unable to assist you at this time?  
 Yes  No

5. Will this be your first Boston Terrier?  Yes  No

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

7. If yes, 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 _____      |  |

Buyer’s Initials: \_\_\_\_\_

CM Initials: \_\_\_\_\_

Buyer’s Initials: \_\_\_\_\_



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8. If no to #5 above, list how many, the age(s), and the registered names of each of your Boston Terriers. Also describe how they were acquired.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

10. 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?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Give a brief description of your house.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

13. How long have you lived at your currently home? \_\_\_\_\_

14. If renting, has your landlord approved your getting a Boston Terrier puppy?

Yes  No Please provide Landlord's name & phone number: \_\_\_\_\_  
\_\_\_\_\_

15. Describe your yard. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_



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

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18. Is everyone in your house in agreement to get a new dog?  Yes  No  
If no, please explain \_\_\_\_\_

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19. For each adult in the household, please list the name and address of your employer, as well as your position and how long you have been with the company.

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20. Do 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

21. Do you agree to feed **ONLY** a high quality ADULT formula dog food from the list of approved dog foods I will provide?  Yes  No?

22. Do 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

23. Do 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

24. 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

25. Do you promise to keep me informed of any health or medical conditions that occur with your puppy whether good or bad?  Yes  No



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26. Where will your puppy stay during the daytime? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

27. Will someone be home with your puppy during the daytime?  Yes  No  
If so, who and for what duration/times? \_\_\_\_\_

28. 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

29. On average, how many hours per day will your Boston be left alone? \_\_\_\_\_

30. Do 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

31. 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? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

32. Do 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 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

34. 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

35. 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

36. 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

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CM Initials: \_\_\_\_\_

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

38. Will you take extra precautions so that your puppy will never be left in a car during warm weather as temperatures can rise to dangerous levels very quickly so the dog will not die from heat exhaustion?  Yes  No

39. Which member of your family will be primarily involved in the training of your puppy?

\_\_\_\_\_

40. 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

41. 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

42. 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?

\_\_\_\_\_  
\_\_\_\_\_

43. Provide the make & model of your vehicles(s). \_\_\_\_\_

\_\_\_\_\_

44. Where will your puppy ride in your vehicle now and as it grows? \_\_\_\_\_

\_\_\_\_\_

45. Do you agree to never let your puppy ride in an open bed pick – up truck or open-bowed powerboat?  Yes  No

46. 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 series are completed?

Yes  No

47. 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?

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

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48. Do you have a size or look preference (e.g., color, markings, etc.)?  Yes  No If yes, please explain: \_\_\_\_\_

49. Do you want a puppy to keep as a pet and companion only, or are you looking for a show potential puppy, or a Boston for potential breeding purposes?  
 Pet/Companion (will spay/neuter)  Show  Breeding Purposes

50. If purchasing a pet puppy, do 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: \_\_\_\_\_

51. 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  N/A

52. 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  N/A

53. 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)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

55. 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

56. 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

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

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58. Do I have your permission to call and speak to your veterinarian as a reference?

Yes  No

59. When are you hoping to add a new Boston to your family?

Immediately/Ready now  Soon/1-3 months  
 Ready now, but willing to wait for the right pup/dog  
 Planning now/3-6 months  In the future/6+ months  
 Other \_\_\_\_\_

60. Please make note if there is any other information you would like to provide, or any questions that you may have that you would like me to answer.

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

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

63. If you are out of state or out of my local area, do you agree to have a home visit arranged (with your consent, of course) from a 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 with them so that you can see what it is like to have a full grown Boston Terrier in your household. 😊  Yes  No



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64. Do you understand and agree that by signing this application, all commitments made within it become a part of and a condition of any resulting agreement?  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 1700  
Shingle Springs, CA 95682-1700

Or email to:  
[ChriMaso@gmail.com](mailto:ChriMaso@gmail.com)

Or fax to:  
(530) 676-7452