



**Adoption Application for the
Blue Ridge Bernese Mountain Dog Club**

Rev 1.0
Effective
1-Jun-2024

Applicant

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

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

Email Address: _____

Best Way to Contact you? (Place an "X" next to your choices)

Home Phone _____ Work Phone _____ Cell Phone _____ Email _____

Partner

Partner Name: _____

Phone (Work): _____ Cell: _____

Email Address: _____

Emergency Contact

Name: _____

Relationship: _____

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

Email Address: _____

Personal Reference

Name: _____

Relationship: _____

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

Email Address: _____



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Residence Information

Length of time at current address: _____

If rental:

Landlord's Name: _____ Phone: _____

Are pets allowed? _____ Allowed indoors? _____

List the relationship and age of all full and part time residents:

Describe your yard in detail (size, terrain, fence, pool, etc):

Describe where and how the dog will spend most of its time, sleep, and how long the dog will typically be alone:



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Please discuss:

- All current pets (dog/cat, age, sex)
- If there is a cat, is it free to roam the house, is the litter box accessible by the dog?
- Vaccination status
- If spayed/neutered and if not explain why
- If on heart worm prevention, if not explain why

Name of Veterinarian & Practice: _____

Address _____ State _____ Zip _____

Phone: _____



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Experience with Dogs

What is your experience with BMD's and/or other breeds:

Are you willing to work with a dog who may have behavioral issues? Yes No

Are you willing to adopt a dog requiring special care, i.e. extensive medical procedures or long-term care before adoption? Yes No

Do you have the right size crate available? Yes No

A proper size crate allows the dog to stand up, turn around, and lie down freely.

I have read, understand, and agree to the above and certify under penalty of law that all information is accurate and complete.

Signature: _____

Date: _____

Signature: _____

Date: _____