Susan and David Lattier

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Questionnaire

1. How did you learn about the Leonberger breed, and have you ever seen, or interacted with one?

2. Why do you desire a Leonberger?

3. Do you have any pets currently living in your home? If you have dogs, are they spayed, neutered or intact?

4. What other breeds of dogs have you owned, and did you have them through life’s end?

5. How many adults reside in your home? If there are children in the home, what are their ages?

6. If you have children, are they familiar with handling puppies or dogs in the proper way? If they have no experience with canines, are you prepared to faithfully mentor them in proper handling of a puppy or dog?

7 Who will bear primarily responsibility for care of the dog?

8. Does the primary canine caregiver work outside of the home? If yes, how many hours will the dog be alone at the residence, and where will the dog be kept during that time?

9. Describe your house, yard and fenced enclosure, and any other facility you have for sheltering and exercising a Leonberger.

10. Do you intend to keep the dog primarily indoors or outdoors? When they are outdoors, where will they be? Please fully elaborate:

11. Leonbergers must have obedience training, beginning when they are puppies. Have you inquired about or observed obedience classes in your area? What, if any, previous dog training experiences have you had? It is important to ensure that any program you choose, employs the concept of “*positive reinforcement*” in their training!

12. Are you familiar with the necessary socialization requirements of a puppy? Please elaborate:

13. What type of activities do you and your family enjoy? How will you integrate your Leonberger into these important family recreations?

14. Please add any additional information that may assist us in selecting the appropriate Leonberger puppy for you and your family.

Preferred Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Show/Breeding Potential? (Y/N) \_\_\_\_\_\_

Family Companion only? (Y/N) \_\_\_\_\_\_\_\_

Undecided? (Y/N) \_\_\_\_\_\_\_\_\_\_ If so, please elaborate. This will help us help you:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Home Phone № (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone № (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_