Puppy’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Male ( ) Female

Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ & \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Price: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registration: ( ) Limited ( ) Full

The genetic health of this puppy is guaranteed under laws of the state of MN for one year. The puppy will be replaced with one of equal value should a life-threatening genetic issue be discovered within that timeframe. All vet expenses incurred after the transfer of the puppy from breeder to purchaser are the sole responsibility of the purchaser. To the best of our knowledge, the puppy is in good health at the point of sale. We strive for excellence in providing puppies that are healthy, which includes giving careful consideration to choosing which dogs to use for our breeding program. If a health issue arises with your puppy, please inform us so that we can use that information to help us in making those decisions.

If you are purchasing a female puppy, wait at least until after her 1st heat cycle before spaying! This will help prevent infections later on due to not allowing her body to mature before performing the procedure.

If, for some reason, you are unable to keep your puppy, please let us know. We always want to know where our puppies end up.

A refund of ¾ the purchase price will be given up to one week after purchase.

A refund of ½ the purchase price will be given up to one month after purchase.

If you need to find a new home for your puppy after that time, please inform us, and we will help find a good home for him/her.

Information on puppy care and tips that we have learned is available on our website: www.lakeviewpuppies.com.

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Purchaser Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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