



## THE HUNGARIAN VIZSLA CLUB OF NSW Rescue Questionnaire/Application Form

All applications should be sent to:

Ros Leighton  
586 Mulwaree Drive,  
TALLONG, N.S.W. 2579 - FAX: (02) 4841 0403

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

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

Postcode: \_\_\_\_\_

Member of RNSWCC: \_\_\_\_\_ Yes/No

Phone (Home) \_\_\_\_\_

Phone (Work) \_\_\_\_\_

Phone (Mobile) \_\_\_\_\_

Email: \_\_\_\_\_

**What breed/s of dog have you owned in the past?**

\_\_\_\_\_

**How old did your previous dog/s live to be?** \_\_\_\_\_

**How long since you have owned a dog/s?** \_\_\_\_\_

**How much exercise will you give your dog?**

\_\_\_\_\_

**How many people live in your household?**

Men \_\_\_\_\_

Women \_\_\_\_\_

Boys \_\_\_\_\_

Boys' Ages \_\_\_\_\_

Girls \_\_\_\_\_

Girls' Ages \_\_\_\_\_

**Who will be primarily responsible for the care and training of your Vizsla?**

\_\_\_\_\_

**What animals do you currently own?**

Dogs \_\_\_\_\_

(Breed) \_\_\_\_\_

Cats \_\_\_\_\_

Other \_\_\_\_\_

**What sort of fencing do you have?**

\_\_\_\_\_

**How high is the fence?** \_\_\_\_\_

**How many hours a day will the dog be without human company?** \_\_\_\_\_

**How many hours a day will the dog spend in the house?** \_\_\_\_\_

**Where will the dog sleep?** \_\_\_\_\_

**What is the main reason for considering a Hungarian Vizsla?** \_\_\_\_\_

\_\_\_\_\_

**Do you have anything special you want your Vizsla to do?** Eg: Obedience/Running partner etc

**What is your preferred sex?** Please circle Male / Female / Either

**What is your preferred age?** \_\_\_\_\_

**Signed:** \_\_\_\_\_

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