# RiAl Cotons Date:\_\_\_\_\_\_\_\_

**1762 Todd Rd**

**Toms River, New Jersey 08755**

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

##  **Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1st Choice** | **2nd Choice** | **Comments** |  |  |
| **Male or Female** |  |  |  |  |  |
| **Tall or Standard** |  |  |  |  |  |
| **Color**  |  |  |  |  |  |
| **-White** |  |  |  |  |  |
| **-White with tan** |  |  |  |  |  |
| **-White with black** |  |  |  |  |  |
| **-Tricolor** |  |  |  |  |  |
| **Size** |  |  |  |  |  |
| **Non- Breedable,****Breedable or doesn’t matter.** |  |  |  |  |  |
| **Type of living conditions dog will be in.** |  |  |  |  |  |
| **Desired temperament.** |  |  |  |  |  |
| **Do you have any other pets?** |  |  |  |  |  |
| **Do you or a family member have allergies?** |  |  |  |  |  |

Type of Dog Desired

Other Comments or Needs: (please use other side if need