



Paws Animal Rescue Adoption Contract

ADOPTION FEES ARE NON-REFUNDABLE

OFFICE USE ONLY

- Cash
- Check
- Credit Card
- Check # _____
- Amt. Pd. _____

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Employer: _____

Email Address: _____ Are you 18 years old or older? Y or N

Pet you wish to adopt? _____

Who is this pet primarily for? Self Children Family

Is your residence a: House/Mobile Home Farm Apt

Do you own or rent the place you live? Own or Rent*

**If you rent, written authorization from your landlord is required, including phone number*

DOGS: Do you have a fenced yard? Y N If not, how do you plan on confining your dog to your property to prevent loss, injury or death on the roads? _____

DOGS: Where will the puppy/dog be when you are not at home? _____

DOGS: How long will this pet be alone, between potty breaks, during the day? _____

Have you had any other pets within the last 5 years? Y N

If so, how many and what kind? _____

What has become of them? _____

How many people (over 18) live in your home? _____ What are their names? _____

How many people (under 18) live in your home? _____ What are their ages? _____

Will all children be supervised while they handle/play with this pet? Y N

Have the children been instructed on proper handling of a pet? Y N

What will the children's role be in caring for this pet? _____

Who is your Veterinarian? _____ Can we call your vet? Y N

What is their phone number? _____ When was your last visit? _____

What is the most serious reason you have visited your Vet? _____

Are your present animals current on all shots? Y N

Who will care for your pet if you are gone? _____

OFFICE USE ONLY

_____ Canine _____ Feline

Name: _____

Color: _____

Breed: _____

DOB: _____

Sex: FI FS MI MN

Rabies Tag #: _____

Veterinarian: _____

Date: _____

HS Member: _____

What will you do with this pet if you move? _____

Have you ever used Paws Animal Rescue services before? Y N

If yes, for what reason? _____

Please list two references that we may call (**please no relatives, people living with you or your Vet**):

Name: _____ Phone: _____

Name: _____ Phone: _____

Please tell us a little more about your family, hobbies and interests to help us match you with a pet to fit your lifestyle: _____

Canine Adoption Fee (all dogs over one year old): \$150.00 + \$9.75 tax = \$159.75
Canine Adoption Fee (all puppies less than 12 months): \$200.00 + \$13.00 tax = \$213.00
Feline Adoption Fee: \$90.00 + \$5.85 tax = \$95.85

ADOPTION FEES ARE NON-REFUNDABLE

Adoption fee covers just a part of the services provided to the animals by PAWS Animal Rescue. This is what you WOULD pay for a new pet taken to the vet on your own.

| | <u>Dog</u> | <u>Cat</u> |
|---|--------------------|--------------------|
| Vaccines | \$80 | \$60 |
| De-Wormer | \$30 | \$10 |
| Flea, Tick & Mange Treatment | \$20 | \$25 |
| Spay or Neuter | \$200 - \$240 | \$95 - \$120 |
| Feline Leukemia & Ringworm Test | N/A | \$55 |
| Estimated Total you would pay at Vets: | \$330-\$370 | \$245-\$270 |

AS PART OF THIS ADOPTION CONTRACT WITH PAWS ANIMAL RESCUE (PAWS):

(Please read and initial after each statement)

1. I UNDERSTAND PAWS has little or no information on this pet as to the temperament, health, age, behavior or how it is around children. PAWS makes no guarantees and adopter assumes all risk. _____
2. I AM AWARE that this pet may be returned to PAWS **upon the review by the Board of Directors of the reason for return and if space is available at that time** _____
3. I AGREE in order to help curb the over population of pets, to have this pet spayed/neutered by a veterinarian at the earliest age recommended (usually 4-5 months), if it has not already been spayed/neutered. If I take the pet to the PAWS chosen vet, PAWS will pay for the surgery. If I choose to have the procedure done at another veterinarian,

adopter must pay the bill and submit a copy of the invoice to PAWS and will be reimbursed the amount equal to that in which we would have paid the vet clinic of our choice. _____

4. I AGREE to provide proper food, water and shelter for this pet and to give it the necessary attention. DOGS – To provide training to make it a healthy and happy animal. Training is a vital part of having a happy dog and home. This is a lifetime commitment. _____
5. I AM AWARE that this pet has been vaccinated to its age appropriateness. I agree to provide veterinarian care, including yearly immunizations for this pet. PAWS reserves the right to follow up with your veterinarian to ensure yearly shots are administered. _____
6. I AM AWARE that pets are not disposable and adopting a pet is to be taken seriously. There are a lot of financial and time commitments involved in owning a pet. _____
7. **I AGREE that I will not knowingly permit this pet to be used for fighting or in the training of fighting animals or to allow it to be used for experimental use.** _____
8. I agree to refrain from physical and/or emotional abuse of this pet at any time and shall not otherwise treat this pet in an inhumane manner or allow third parties to do so _____.
9. **I will insure this pet will wear an appropriate collar and identification tag at all times.** _____
10. **DOGS-Adopter is advised and understands that during warmer months temperatures can escalate to a fatal level in a vehicle within minutes. Adopter agrees that the dog shall never be left unattended in any vehicle.** _____
11. I AM AWARE that PAWS is a non-profit organization dedicated to the protection and care of helpless pets. For this reason, if I violate any portion of this agreement and PAWS requests possession of the pet, I will immediately relinquish the pet making no charges for expenses or care. _____
12. **Adopter warrants that this pet will live in the main living quarters of the Adopter's residence, as a family member. DOGS – The animals shall not be kept in a kennel environment except when hospitalization is necessary or if brief, temporary boarding is necessary due to illness or absence of the Adopter.** _____
13. I UNDERSTAND PAWS is managed by volunteers and the adoption process may take some time. _____
14. **FORFEITURE OF PET – Any breach by Adopter of this contract shall constitute immediate forfeiture by the Adopter of any and all of the adopter's interest. This includes any check returned to PAWS for insufficient funds, which will be turned over to the State's Attorney's Office.** _____
15. Adopter acknowledges that the purpose of this Agreement is to safeguard the health and well-being of the pet, to protect the animal against neglect, abuse and cruelty, and that adopter enters into the contract freely and with good will. _____
16. **Release of Liability and Hold Harmless Clause:** In consideration of the receipt of the above-referred pet, the Adopter hereby understands, promises and agrees to forever release, discharge, indemnify and covenant to hold harmless Paws Animal Rescue, its directors, officers, volunteers and successors and assigns from any and all claims, damages, costs, expenses, loss of service, actions and causes of action arising out of any act or occurrence relating to the above referenced pet from the present time forward. _____
17. **Veterinarian Release of Information:** Adopter understands and agrees that Paws Animal Rescue shall have the right to contact ANY veterinarian who has examined and/or treated the pet for the purpose of gaining information regarding any aspect of the pet's health and care including, but not limited to, verifying the purchase of fecal examinations, vaccinations and/or other treatments as required by this contract. Adopter explicitly authorizes without further notice, the release of any information regarding the treatment, training or other interaction of the animal by or with any animal control officer, law enforcement officer, veterinarian, trainer, groomer, boarder or any other service provider. _____

PRINT NAME: _____

Signed: _____ Date: _____