

Suzie's Friends Animal Shelter

ADOPTION APPLICATION AND CONTRACT

We hope that you find the right family pet. Please fill out the following application carefully and completely. The application is designed to help us make the best placement possible for each pet. The adoption process may take one hour. You will be talking with our staff or volunteers, meeting and socializing with selected pets, reviewing responsibilities that you will assume. We will help you learn more about inoculations, training, feeding, etc. All this can take time, however it is time well invested when you consider that a well cared for pet may live 10-18 years. Therefore, we ask for your patience and cooperation in this joyful process of bringing people and pets together.

Please remember that it is your responsibility to contact us within 1-3 days to determine if your application has been approved.

Please read the following section carefully. In order to be considered as an adoption candidate you must:

- Understand that Suzie's Friends Animal Shelter reserves the right to **deny ANY adoption application.**
- Be 18 years of age or older.
- Pay adoption fees when approved.
- Be willing and able to have your pet examined by a veterinarian and provide medical treatments at your expense.
- Be willing and able to provide proper confinement and shelter, training and loving attention for a pet.
- Have your pet vaccinated annually against rabies, and other contagious diseases.
- Agree to maintain your pet's health thru management of internal and external parasites such as Heartworms and Fleas.
- Abide by City, County, and State ordinances and laws pertaining to animals.
- Abide by the rules set forth in our Adoption Agreement.
- We **do not** adopt out dogs to serve primarily for Guard purposes or cats primarily as mousers.
- Must not have surrendered a pet to a shelter, sold or given away a pet in the last 30 days.
- We do not allow gift adoptions, you may bring the happy new owner in to choose.
- Agree to keep any dogs adopted as inside pets if adult weight of dog is estimated to be under 20 pounds.
- Agree to keep de-clawed cat as inside **only** pet.

PERSONAL INFORMATION:

Driver's License Number: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

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Home Phone: () _____ Work Phone: () _____

Are you 18 years of age or older? Yes / No

Do you Own _____ or Rent/Lease _____ your home.

If you Rent/Lease your home does your Landlord allow pets? Yes / No

Landlord's Name: _____ Phone #: _____

Do you live in the: City _____ County _____

House _____ Apartment _____ Mobile Home _____ Other _____

How long have you lived at your present address? _____

What was your previous address? _____

Are you planning to move in the next six months? Yes / No

If so, what are the plans for the pet? _____

How many waking hours during the day does your family have to devote to your new pet? _____

Number of persons residing in your household _____

Any Children under the age of 18? Yes / No If so, what are their ages? _____

Does anyone in your household have allergies to Cats _____ Dogs _____ Other _____

Tell us a little about your past pets:

How many Dogs have you owned in the past five years? Females _____ Males _____

Were any of them spayed or neutered? Yes _____ No _____

Breeds _____

How many Cats have you owned in the past five years? Females _____ Males _____

Were any of them spayed or neutered? Yes _____ No _____

Breeds _____

Other types of pets? _____

What happened to the pets you no longer own? _____

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How many pets do you currently own? (dogs/cats)_____

Have you ever taken an animal to a shelter before? Yes / No

If yes, what were the circumstances?_____

How will the pets you own now get along with the pet you would like to adopt?_____

If you own Dogs or Cats now, do you have them on Heartworm prevention? Yes / No

if yes, what kind?_____

Are your present pets up to date with their vaccinations? Yes / No

Who is your Veterinarian?_____ Phone # ()_____

PET SELECTION:

May we contact your Veterinarian? Yes / No

Why do you wish to adopt a pet?_____

What type of temperament are you looking for in a pet?_____

I would like my new pet to get along with: children____ dogs____ cats____ other_____

Does your family support this decision to bring a pet into your home? Yes / No

Are you willing to make a 10 to 15 year (average life span) commitment to this pet? Yes / No

Where will your new pet spend most of it's time?_____

Where will your pet sleep?_____

If adopting a cat, can you restrict the cat to indoors only? Yes / No

If adopting a dog, what type of outdoor shelter and fenced in area is available?_____

May we visit your home in the future to verify your pet's well being? Yes / No

Do you understand our local ordinances pertaining to the leash law and rabies vaccinations?
Yes / No

Are you prepared to provide **ALL NECESSARY MEDICAL ATTENTION** for the pet you adopt?
Yes / No

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What will you do, if for any reason, you are not able to keep your new pet? _____

I hereby certify that all the information supplied by me in this application is true and correct

Adopter's Signature

Date

***SUZIE'S FRIENDS ANIMAL SHELTER RESERVES THE RIGHT TO REFUSE ANY
ADOPTION BASED ON THE BEST INTEREST OF THE ANIMALS ENTRUSTED TO
OUR CARE.***

Approved _____

Disapproved _____

Signature of Shelter Staff Member

Date

Comments: _____

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Please initial each paragraph to acknowledge that you understand each adoption condition

- Suzie's Friends Animal Shelter does not make any expressed or implied warranties or guarantees with regard to the animal you are adopting. _____initial
- The Adopter has been apprised that animals react differently to human actions and that animals can often react unpredictably. Suzie's Friends Animal Shelter makes no claims or representations as to the behavior, health or temperament of the animals placed for adoption. _____initial
- I release and waive from any liability or responsibility, Suzie's Friends Animal Shelter and any employees thereof in the event that any damages to person or property are caused either directly or indirectly by this animal. _____initial
- After the animal's release from the Veterinarian's care, under which Suzie's Friends Animal Shelter has placed it to be altered; delivery of the animal is made with the understanding that the Adopter accepts the animal "as-is" and assumes possession, title and full physical and financial responsibility for the adopted animal. _____initial
- Adopter acknowledges that he or she shall bear sole responsibility for proper feeding, sheltering and Veterinary care of the animal. Suzie's Friends Animal Shelter will not be responsible for any Veterinary or other bills associated with the adopted animal once it is released to the Adopter. _____initial

This contract is entered into between _____ as the Adopter and Suzie's Friends Animal Shelter on this _____ day of _____ 20_____.

1. Suzie's Friends Animal Shelter agrees to the following:

- a. To give the Adopter title to and possession of the animal represented by tracking number _____ for so long as the Adopter complies with the terms of this contract.
- b. To refund any adoption fees paid by the Adopter to Suzie's Friends Animal Shelter for adopting this animal. If this animal proves to be in poor health and is returned or dies of natural causes within 30 days from the date of this Contract. Such conditions must be verified in writing by the attending Veterinarian. The Adopter shall have no right to a refund unless the Adopter returns the animal as required in paragraph 2b or 2c and notifies Suzie's Friends Animal Shelter of the death or Veterinarian's findings as to poor health, on or before 30 days from the date of this Contract.

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2. In return, as Adopter, I agree to the following:

- a. To pay any fees associated with the adoption and Veterinary examination including, but not limited to the Rabies vaccination, de-worming, sterilization and any other necessary vaccinations and/or treatments. _____initial
- b. Formally request a refund or trade if the adopted animal should be found by the attending Veterinarian to be in poor health or have extensive or serious medical problems. I agree to notify Suzie's Friends Animal Shelter of such findings on or before the 30th day from the date on this contract. I further agree to return the animal to Suzie's Friends Animal Shelter with a Veterinarian's written verification of the health concerns or cause of death. _____initial
- c. 50% refund is possible if a valid reason is given, within 30 days, if pet doesn't "work out". Refund to be given when pet is adopted. _____initial
- d. To provide adequate food, water, shelter, exercise, and Veterinary care for the natural life of the animal I adopt. That this animal shall be kept as a pet and companion animal, and **is not** to be used for any commercial or utilitarian purpose. _____initial
- e. To return the animal to Suzie's Friends Animal Shelter if I no longer desire or are unable to keep the animal for any reason. I will not sell, trade or abandon the animal. If the animal is lost, I will make every effort to recover it. _____initial
- f. To allow any authorized employee of Suzie's Friends Animal Shelter to investigate the premises where the animal is to be kept during the life of said animal. To allow an authorized employee to reclaim the adopted animal, if in the judgment of the investigator, the animal is not being adequately cared for, if I have not complied with any provisions of this contract, or if I have misrepresented any facts to Suzie's Friends Animal Shelter in the adoption application and contract I have completed and/or signed. _____initial
- g. I acknowledge the Clinch County Ordinance O.C.G.A, sections 4-8-20 through 4-9-29, which states that my animal may be impounded if allowed to run at large in a leash law area. May be impounded if found to be vicious and not properly confined, and may be impounded if not wearing a current rabies tag. _____initial
- h. To pick up my newly neutered male dog no sooner than 5 days after surgery, nor later than 7 days. To pick up my newly spayed female dog or cat no sooner than 7 days after surgery, nor later than 9 days. _____initial

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Adopter's Signature

Date

Adopter's Printed Name

Suzie's Friends Staff Signature

Date

Animal's description:

Dog age:_____

Breed:_____

Color:_____ male / female

Puppy age:_____

Breed:_____

Color:_____ male / female

Cat age:_____

Breed:_____

Color:_____ male / female

Kitten age:_____

Breed:_____

Color:_____ male / female