



ADOPTION CONTRACT

Paw Prints Animal Rescue
P.O. Box 1472, Garner, NC 27529
(919) 772-9107 www.pawprintsrescue.org

I agree to adopt _____ Date of birth (approx.) _____

Description _____ Male Female

Next vet visit due _____ for _____

Food and/or special instructions _____

- Paw Prints Animal Rescue (hereinafter "Paw Prints") has discussed with me the pet's behaviors and habits. Paw Prints makes no representations or warranties whatsoever regarding this pet's condition or behavior. I hereby release Paw Prints from any and all loss, damage, expense, claim, or cause of action in any way arising out of or relating to this pet or to any of Paw Prints' efforts to facilitate the rescue and adoption of this pet.
- Paw Prints has given me a record of the pet's medical history as known. I understand that this pet has received veterinary care through the Paw Prints adoption program but undiagnosed conditions sometimes exist. I understand if this pet is diagnosed with a previously undiagnosed condition that existed at the time of adoption, I may return the pet to Paw Prints for a full refund of the adoption fee or keep the pet and assume full responsibility for its treatment.
- I agree to provide the care and attention necessary to ensure this pet's health and well-being including:
 - √ Adequate, quality food and water.
 - √ Indoor shelter for cats – **Paw Prints requires that cats be kept inside.**
 - √ **Monthly heartworm preventative for dogs starting** _____
 - √ Fenced yard or leashed walks for dogs – dogs may not be kept on tie-outs or zip lines.
 - √ All routine and emergency care.
- I represent that I am adopting this animal as a companion and personal pet. I will maintain this pet at my primary residence at the address listed below. I will inform Paw Prints if I move from the address below and can no longer keep the pet. I agree to pay an adoption fee as required by Paw Prints in good and sufficient funds.
- If unaltered, this pet must be sterilized by _____ (before six months of age). A deposit is required to ensure the pet will be sterilized and will be refunded once satisfactory proof of sterilization is provided to Paw Prints.
- I agree to obey any applicable vaccination laws and obtain and maintain any licenses or permits relating to this pet as required by law.
- I agree to allow a representative of Paw Prints to visit my residence at a reasonable time to ensure the terms of this contract are being followed.
- **If I find that I cannot keep this pet, I will return it to Paw Prints along with its complete medical record.** _____
If the pet is returned for any reason other than an undiagnosed medical condition (as described above), the adoption fee will not be refunded. Under no circumstances will this pet be abandoned, sold, or given to a shelter or to any other person.
- I understand that noncompliance with any provision of this contract, including the requirement that unaltered pets shall be altered before the age of six months, will constitute a breach of contract and Paw Prints shall have the right to demand the immediate return of the pet, and/or to pursue against me any other right or remedy that Paw Prints may have at law or in equity.
- I understand that this is an adoption contract and not a contract for the sale of this pet. The contract and the application I submitted to Paw Prints constitute the entire contract for the adoption of this pet, and any and all prior representations or agreements between Paw Prints and me are void and of no further force and effect unless incorporated herein.
- I represent that I am at least 18 years of age and I have read this entire contract and understand all of the representations and conditions incorporated herein and shall comply with the provisions hereof.

Signature _____ Date _____

Address _____ City _____ State _____ ZIP _____

Home Phone _____ Business Phone _____ DL No. _____

Payment Method: Adoption Fee _____ Cash _____ Check _____

Spay/Neuter Deposit

Foster Parent _____ Phone Number _____