Adoption Contract

*** First Name**

*** Last Name**

*** Email**

*** Home Phone Number**

Cell Phone Number

Gender

*** Current Address**

Current Address 2

State/Province/Region

*** Zip Code and City**

Country

Adoption Requirements

Please read and answer each statement pertaining to the type of animal you are adopting to indicate you agree with the required stipulations. All stipulations must be accepted in order to adopt.

***Which pet are you adopting?**

Pet ID number

***1. I agree I will provide appropriate food, water, and shelter for the animal given to my care.**

- Yes
- No

***2. I agree I will not hold FFAS responsible for any liabilities incurred by this animal once it is given to my care.**

- Yes
- No

***3. I agree I will not house this animal in an unsatisfactory fashion, such as leaving it continuously chained to an object.**

- Yes
- No

***4. I agree to make sure the animal receives regular veterinary care, which includes following up with vaccinations, grooming, parasite control and treatment of any illness or injury.**

- Yes
- No

***5. I agree to keep this animal leashed in accordance with TN state law when it is outside of my person or property.**

- Yes
- No

***6a. In accordance with recommendations from the American Veterinary Medical Association, I agree not to de-claw any cat adopted from FFAS unless it is deemed medically necessary by a veterinarian and I agree that the cat will be kept indoors only.**

- YES
- NO
- DOES NOT APPLY

***6b. In accordance with recommendations from the American Veterinary Medical Association, I agree I will not participate in the tail, dewclaw, or ear docking unless it is deemed medically necessary by a veterinarian and I agree that no dog will be kept on a chain or cable long term.**

- YES
- NO
- DOES NOT APPLY

***7a. If for any reason I am unhappy with the adopted animal given to my care, I agree I will contact FFAS and arrange to return the animal to their care.**

- Yes
- No

***7b. If for any reason I am unhappy with the adopted animal given to my care, I agree the animal will not be given to another individual or organization without the approval of FFAS.**

- Yes
- No

***8. I understand after adopting this animal, that it falls completely under my care, and I will not hold FFAS responsible for any medical conditions unknown to them. I will not hold FFAS responsible for any veterinary bills after the animal has been in my care for more than 10 days.**

- Yes
- No

***9. If a medical problem is found within 10 days of adoption, I will do one of the following:**

- Contact FFAS and return the animal directly to them
- Contact FFAS and return the animal for a refund
- Allow FFAS to treat the illness with their veterinarian (adopter MUST contact FFAS prior to any treatment)
- Treat the animal at my expense and assume all responsibility

***10. I understand that FFAS cannot be responsible for false negative reports on FIV/FLV (feline AIDS and feline leukemia) tests on any cat.**

- YES
- NO
- DOES NOT APPLY

***11. I understand that FFAS cannot be responsible for false negative reports on heartworm tests on any dog.**

- YES
- NO
- DOES NOT APPLY

***I will allow FFAS to make unannounced visits to my home to check on the condition and well being of the animal given to my care, if I am unreachable by other means. If FFAS feels any of the conditions of this contract have been violated, I will allow them to reclaim the animal.**

- Yes
- No

***13. I understand that there are no refunds after I have adopted this animal (except as noted in the statement 9 above).**

- Yes
- No

***14. If I was unable to provide an adequate vet reference, I agree to take the dog to the vet within 30 days of adoption and provide proof of purchasing heartworm preventative.**

- YES
- NO
- DOES NOT APPLY

***15. I understand and expressly recognize that, in the event that I breach the terms of this agreement, damages will accrue to FFAS that will be difficult or impossible to calculate. Accordingly, I agree that I will pay FFAS the sum of $500.00 as liquidated damages, and not a penalty, in the event that FFAS demonstrates I breached the terms of this agreement.**

- Yes
- No

Signature

***Signature**

***Today's Date**

*****

- [ ] By electronically signing this contract, I am agreeing to all the requirements outlined above.