

The Animal Interest League and Sanctuary
 720 W 4th. St.
 Delta, CO 81416
 970-874-1078
 website: tailsonline.org
 email: tailsadoptions@gmail.com



Adoption Agreement & Contract

TAILS does not place pets on a “first come, first serve” basis. TAILS asks these questions to determine the pet most compatible with your lifestyle and to determine the most appropriate owner for each pet, ensuring a forever relationship. TAILS reserves the right to perform a home inspection prior to adoption and to approve or deny any adoption for any reason.

To apply, you must:

- ◆ Be 21 years of age or older.
- ◆ Have approval of your landlord if you rent.
- ◆ Be able and willing to spend time and money necessary to provide training, medical treatment and proper care for a pet.
- ◆ Have identification showing your present address
- ◆ Identify veterinarian.

ID & Name:	Predominate Breed:	Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Neutered <input type="checkbox"/> Spayed	<input type="checkbox"/> Not Neutered <input type="checkbox"/> Not Spayed
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Owner Information

Name:	Driver's License Number:	Date of Birth:	Phone:
Physical Address			
Mailing Address (if Different)			
Email Address			
How did you find this pet?			
Would you like info on being a TAILS volunteer or Foster Home?			<input type="checkbox"/> Yes or <input type="checkbox"/> No

Pet Experience/History

Do you currently have a pet?	If yes, list breed, gender, age	Get along well with other pets?
Where will your new pet live (outside, inside, fenced area, garage)?		
What pets have you owned in the last 5 years? List breed, gender, how long you had it, and what happened to it.		
Have you ever had a pet euthanized?	If yes, explain	
Have you ever returned, to a shelter/organization, a pet that you adopted? If yes, explain		
In case of injury, illness or death, what provisions will you make to care for your animals?		
Who is your veterinarian (name)?	City	Phone:
Why do you want a pet?	<input type="checkbox"/> Companion to you <input type="checkbox"/> Companion to family <input type="checkbox"/> Companion to dog <input type="checkbox"/> Guardian/Protection <input type="checkbox"/> Barking Watchdog <input type="checkbox"/> Train as therapy dog	

I declare that all the information presented here is true and correct; and that I have not knowingly omitted pertinent information. I understand that TAILS reserves the right to reclaim the animal at any time if it comes to their attention that circumstances exist that would make the adoptive home unsuitable for the animal. I agree that if TAILS should determine at any time that any of the provisions of this agreement have not been complied with, I will return the animal to TAILS upon demand. I authorize TAILS, at its sole discretion, to determine whether or not the pet has been abused or neglected. I understand that there may be history with the animal that is unknown to TAILS. I understand that TAILS will not be held liable for any damage, personal/property/public by the pet. I agree to furnish the animal with acceptable veterinarian care. I will not sell the animal or give it to an unsuitable home. TAILS will reserves the right to conduct a follow-up visitation at any time.

Owner Declaration

1. I agree to notify TAILS of any change of address or phone occurring within one month the adoption.	<i>Initial</i>
2. I agree to return the pet to TAILS if, at any time, I am unable or unwilling to care for it. The adoption fee will not be refunded after 14 days from adoption date.	<i>Initial</i>
3. I agree to care for the pet humanely, including but not limited to providing daily fresh water, good quality food, good shelter, exercise and veterinary care for duration of the pet's life.	<i>Initial</i>
4. I understand that all of the TAILS adoptable pets have been quarantined and determined to be healthy. Once the pet leaves this facility, any veterinary care is my responsibility unless determined otherwise by TAILS, in which case the pet can be taken to a TAILS contracted veterinarian upon TAILS approval. I understand that if I take my pet to a contracted or non contracted veterinarian without approval by TAILS, all costs associated will be my responsibility.	<i>Initial</i>
5. I have received a copy of the Rabies Brochure.	<i>Initial</i>
6. I have received a copy of my pets medical records.	<i>Initial</i>

Signature - Adopter	Date	Adoption Fee
Signature - Adopter	Date	_____ Cash _____ Check _____
Signature - TAILS Representative	Date	

JUVENILE SPAY AND NEUTER AGREEMENT

I agree to spay or neuter the dog that I've just adopted. I understand that this procedure is covered in my adoption fee and will contact TAILS within 90 days to make an appointment at a TAILS contracted veterinarian for this procedure.

Signature of new pet owner	Date
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