

Adoption Contract

Cheri's Second Chance Rescue
12523 Limonite Ave
Mira Loma, CA 91752
951-790-2393
Email: cheris2ndchanceresq@yahoo.com
Website: cheris2ndchanceresq.org PAYPAL: cheris2ndchanceresq@yahoo.com

I _____ agree to adopt: _____ Date of Birth (Approx.) _____

Description _____ Male ___ / Female ___ Microchip# _____

Next vet visit _____.

Cheri's Second Chance Rescue Inc. has discussed with me the pet's behaviors and habits. Cheri's Second Chance Rescue Inc. makes no representation or warranties whatsoever regarding this pet's condition or behavior. I hereby release Cheri's Second Chance Rescue Inc. 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 Cheri's Second Chance Rescue Inc. efforts to facilitate the rescue and adoption of this animal.

- Cheri's Second Chance Rescue Inc. has given me a record of this pet's medical history as known. I understand that this pet has received veterinary care through the Cheri's Second Chance Rescue Inc. and Pedley Square Veterinary Clinic and/or Starlight Clinic but undiagnosed conditions sometimes exist. I understand if this animal is diagnosed with a previously undiagnosed condition that existed at the time of adoption, I may return this animal to Cheri's Second Chance Rescue Inc. for a full refund of the adoption fee or keep this animal 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,
 - The cat(s) be kept inside unless there is an outdoor enclosure that has been built for the cat(s) safety,
 - All routine and emergency medical care.
 - **If microchipped, Cheri's Second Chance Rescue Inc. MUST be listed as a 2nd party contact. (Initial here) _____**
- I represent that I am adopting this pet as a companion and personal pet. I will maintain this pet at my primary residence listed below. I will inform Cheri's Second Chance Rescue Inc. if I move from the address on this contract and if you can no longer keep the pet, I will return the animal back to Cheri's Second Chance Rescue Inc.
- I agree to obey any applicable vaccination laws and obtain and maintain licenses or permits relating to this pet as is required by law.
- If unaltered, this pet must be sterilized by _____ (before six months of age). _____ **(Initial here)**
- I agree to allow a representative of Cheri's Second Chance Rescue Inc. 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 Cheri's Second Chance Rescue Inc. 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 turned over to an animal shelter or to any other person.
- I understand that noncompliance of any provision of this contract will constitute a breach of contract and Cheri's Second Chance Rescue Inc. shall have the right to demand the immediate return of this pet.
- 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 Cheri's Second Chance Rescue Inc. constitute the entire contract for the adoption of this pet, and no prior representations or agreements are of any 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.

Signature _____ Date _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Email: _____

Business Phone: _____ Donation(s): \$150.00/1 pet or \$100.00/ea. For 2 pets Prepaid: \$ _____