



Williston Animal Group
PO Box 752
Williston, FL 32696
(352)528-9888
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www.willistonanimalgroup.org

ADOPTION CONTRACT

Thank you for your interest in adopting a dog from WAG (Williston Animal Group).

Name of Dog: _____ Date: _____

Your Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Telephone: _____

Veterinarian: _____

Housing & care plans for this dog: _____

Other pets in the home: _____

Where did you find out about this dog and/or WAG? _____

SPECIAL NEEDS & CONCERNS

Medical conditions: _____

Current Medications: _____

Special Diet: _____

Behavioral concerns for this dog: _____

I acknowledge that I have been made aware of these special needs or concerns of this rescue dog.

Initials

Initials

I agree to care for the above dog and provide a loving home and veterinary care. If at any time I cannot care for the dog for any reason, I agree to return the dog to Williston Animal Group. The above dog may not be rehomed without the express written permission of WAG and agreed to in writing by both parties. The above dog will remain in my care and control. I further agree that I am the primary adopter and that all adults in the household agree to this adoption. In addition, I attest that I do not have any children under the age of seven living in the home with this dog.

TRIAL ADOPTION ONLY

Initials

This is a trial adoption for one month. At the end of one month, on _____ this adoption will be considered completed if I have not returned the dog to WAG. During this time, WAG will be responsible for veterinary care for this dog at the veterinarian of WAG's choice. WAG reserves the right to cancel this trial adoption at any time and remove the dog from the adopter's care.

FOSTER TO ADOPT - VETERINARY CARE NOT COMPLETE

Initials

This dog is still undergoing veterinary care and will remain a foster dog until WAG has determined that the veterinary care is complete. During this time, WAG will be responsible for veterinary care at the veterinarian of WAG's choice. WAG reserves the right to cancel this pending adoption at any time and remove the dog from the adopter's care. The adopter agrees that they will make the dog available for all veterinary appointments. Once the veterinary care is complete, the adopter will be advised of any on-going medical issues and be given the option to move forward with adoption or return the dog to WAG. They will be given one week to make this decision. If after one week of the notification, the dog has not been returned to WAG, the adoption will be considered completed.

ADOPTION HOLD HARMLESS & RELEASE AGREEMENT

1. In consideration of Williston Animal Group (WAG) permitting me to adopt a dog from this organization, the undersigned does hereby release, remise and forever discharge, indemnify and agree to HOLD HARMLESS, WAIVE, DISCHARGE AND COVENANT NOT TO SUE WAG, their officers, board of directors, volunteers, any employees or members, hereafter referred to as RELEASEES, from any claim, demand or cause of action whether now in existence, or hereafter arising for any loss of personal property, injury or death; arising out of, resulting from, caused by or contributing to, in whole or in any part, by any action or failure to act, negligence, breach of contract, or any other misconduct on the part of WAG, its officers, board of directors, volunteers, employees and/or members.
2. Further, I recognize and acknowledge that certain risks of harm are or may be inherent in the various activities involved in owning and caring for a dog. I am aware that some dogs can pose dangers to people and other animals. Such dangers may include but may not be limited to; dogs can bite, trip, jump, knock down, and fight or otherwise spread germs or bacteria. Activities involving dogs may result in injury or damage to property.
3. It is my express intent that this Release and Hold Harmless Agreement (hereinafter "RELEASE") shall bind the members of my family if I am alive; and my heirs, assigns, and personal representative(s), if I am no longer alive. It shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-mentioned RELEASEES. I hereby further agree that this RELEASE shall be construed in accordance with the laws of the State of Florida.
4. I UNDERSTAND THAT WAG WILL NOT BE RESPONSIBLE FOR ANY MEDICAL COSTS ASSOCIATED WITH ANY INJURY OR ILLNESS THAT I, OR ANYONE, MAY SUSTAIN AS A RESULT OF THE OWNERSHIP OF THIS ADOPTED DOG.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the above RELEASE, understand it, have had an opportunity to ask questions, and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing written agreement, have been made. I am at least eighteen (18) years of age and fully competent, and I execute this RELEASE for full, adequate, and complete consideration fully intending to be bound by the same.

Signed: _____ Dated: _____

Printed Name: _____

WAG Rep: _____

Payment Amount: _____ Payment Method: _____ Paid in Full: _____

DL# (if paying by check): _____ State: _____