Date: _____

Upper Keys Humane Society

101617 Overseas Hwy., Key Largo, FL 33037
305.451.3848

Adoption Application & Agreement

Animal Name: _____ **Species:** _____ **Sex:** _____

We are pleased that you are interested in adopting one of our "family" members. It will reward you with unending love and devotion. As with any responsible Shelter we must try to provide each animal with a GOOD permanent home, thus we ask you to please supply us with the following information.

Identification

Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Home/Cell Phone: _____ Work Phone: _____ E-Mail: _____

Employment

Employer: _____ How many years: _____ Hours per week: _____

Position: _____ Address: _____

Spouse/Roommate Employer: _____ Hours per week: _____

Housing

Do you rent or own? _____ **If you rent, we will need a letter of approval from your landlord.**

If you own, how many years have you resided there? _____

If you rent Landlords Name: _____ Landlord Phone: _____

Are animals allowed? _____ Are there any restrictions? If restrictions, what are they? _____

Do you have a yard: ___Yes ___No Is the yard completely fenced: ____ Yes ____ No

Household Members

Number of adults: _____ Number of children: _____ Ages of Children: _____

Roommate/Spouse Name: _____ Phone Number: _____

Is anyone in your home allergic to dogs or cats? ____ Yes _____ No

Pet History

List the animals by name that have been part of your family the last 5 years. Indicate the status of each using the following codes:

A/Still with me B/Lost/ran away C/Euthanized D/Dead E/Sold F/Gave away

PET NAME	SPECIES	STATUS

Name of your veterinarian: _____ Phone Number: _____

Are your pets: _____ Indoor only _____ Outdoor only _____ Both (Explain)_____

Are your pets current on their vaccinations: _____

Are all your pets spayed/neutered: ____ Yes ____ No

If no, please explain: _____

How will the pet receive exercise: _____

Where will the pet be kept: _____ Indoors _____ Enclosed in a room _____ Fenced yard ____ Crate/Carrier

Other_____

Have you adopted from us before? _____ Yes _____ No

Are you financially able to pay for regular vet exams, regularly due vaccinations, heartworm and flea/tick preventatives, and do you agree to pay for any emergency treatment? _____ Yes _____No

Do you agree to regular and proper care for the animal? _____Yes _____ No

Adoption Agreement

I _____enter into this agreement to adopt (Animal Name): _____

I hereby acknowledge receipt from U.K.H.S. the animal described above. I appreciate you make no warranty regarding it, be it ownership, condition or otherwise. I understand that I am voluntarily adopting, and it may have medical needs, socialization problems, and may not be housebroken. I will not hold the Upper Keys Humane Society responsible for any illness of the animal nor for any damages which the animal may do to any person or property. If at any time I desire to relinquish custody, or U.K.H.S. demands its return for any reason, I agree to return the animal to U.K.H.S. making no charges of any character for licensing, care, food or other services.

I shall be personally responsible for the humane care and control of the animal, and your agent shall be allowed to see it at any time. I further understand that any sum I have given to U.K.H.S. is a donation towards its work in caring for this and other animals.

I acknowledge that this animal I am receiving is either spayed or neutered. **If the animal is too young to be altered, I acknowledge and agree that I will do so prior to six (6) months of age.** If the animal is under one (1) year of age, I understand that I am responsible for taking the animal to the veterinarian used by U.K.H.S. The veterinarian will continue with the required vaccinations and at the age of six (6) months will spay or neuter the animal. This is a prerequisite for all adoptions from the U.K.H.S. and is paid for by U.K.H.S.

I agree to provide U.K.H.S. representative access to all parts of my home and property for a home inspection before my adoption application is approved. I agree that if I refuse or fail to comply with any provision of this agreement, U.K.H.S. has the right to terminate this agreement and has the right to the immediate surrender and return of my animal, I further consent to provide U.K.H.S. access to my premises if necessary, to facilitate the return.

Veterinary procedures covered by this adoption agreement include; basic spay or neuter, required shots and a microchip. _____ (applicants initials).

If optional services, procedures, or additional tests are performed once the animal leaves our care, it will be the financial responsibility of the adoptee, not Upper Keys Humane Society; IV fluids, pain medication, teeth cleaning, additional tests, etc. are not covered by our adoption fee. _____ (applicants initials).

Printed Name: _____

Signature: _____ Date: _____

Adoption fees are as follows: Dogs: $300 Cats: $100

U.K.H.S. Staff use only: Initial each box

_____Attached a copy of DL

_____Payment Received $_____ Cash/Check/CC (circle one)

_____Form is filled out completely & signed by applicant

_____Micro Chip information attached #_____

_____Rabies tag # _____

_____Adoption Overseen by_____