**The Humane Society for Inland Mendocino County**

9700 Uva Drive Redwood Valley, CA 95470

Phone  (707) 485-0123 Fax: (707) 485-0351  
Email: [hsimc@pacific.net](mailto:hsimc@pacific.net)

**DOG ADOPTION APPLICATION**

**The Humane Society for Inland Mendocino County reserves the right to refuse any adoption.**

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Animal’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (2nd applicant) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Household Information**

Number of adults and children in home (please list children’s age) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is an adult home during the day? [ ] No [ ] Yes Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The Humane Society for Inland Mendocino County will need approval from a landlord, rental agency, or homeowner prior to completing this adoption.**

Dwelling [ ] House [ ] Apartment [ ] Condo/Townhouse [ ] Mobile home in park

Do you own [ ] Yes [ ] No Time at current address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Rent? Landlord/Management Agency’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Other? Mobile Home Park Manager/HOA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pet History**

Do you currently have pets at home? [ ] NO [ ] If yes, what type(s) of pet(s) and how many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How long have you had pet(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterinarian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you had other pets in the past 10 years? [ ] No [ ] Yes What type(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you ever had to rehome a pet? [ ] NO [ ] Yes If yes, Please explain the circumstances

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Have you ever adopted from our Humane Society before? [ ] No [ ] Yes When? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Pet Information**

Helping an animal adjust to a new home environment is a major undertaking. Kittens and Puppies in particular. Please describe how much time will be spent and what activities you will be doing to help this pet adjust to your home and lifestyle. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What behavior do you consider unacceptable? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How would you address this behavior? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Where will the dog be when you are not home? [ ] Indoors [ ] Crate [ ] Outdoors

What outside space is available to the dog? [ ] Kennel [ ] Garage [ ] Fenced yard

Fence height? \_\_\_\_\_\_\_\_\_\_\_\_ Approximate size of yard?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­

Where will the dog be kept when you are at home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will the dog sleep? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note that we do not adopt out dogs that will be sleeping outdoors unless approved by the Kennel Manager or Shelter Coordinator.

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Hours per day the dog would be left alone? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you live in an area where the dog will be exposed to livestock? [ ] No [ ] Yes If yes, please explain how the dog will be introduced to and/or separated from livestock \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you keep the dog on heartworm and flea/tick prevention [ ] No [ ] Yes

Will you provide needed medical treatment and vaccinations for the dog [ ] No [ ] Yes

If you cannot keep this dog, you are required to contact the Humane Society before rehoming. **Initial here \_\_\_\_\_\_\_\_\_\_\_**

Adopting a dog is a great responsibility. You may be sharing your life with this dog for 10 to 15 years. Dogs are totally dependent on their humans for companionship, exercise, training, food, water, shelter, and veterinary care. This involves a physical and financial commitment. Are you willing to make this lifelong commitment? [ ] No [ ] Yes

I certify that the above information is true and correct. I understand that false information will void this application. I hereby accept possession and title of this dog “AS IS” at my own risk and hereby release and wave any rights against The Humane Society for Inland Mendocino County which I may have now or in the future for any damages to persons or property caused by this dog.

**Adopters Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HSIMC Rep: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Notes:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Humane Society for Inland Mendocino County**

**Dog Adoption Contract**

**As the adopting party, I agree to the following provisions:**

I agree to obtain all necessary licenses required by local authorities for this dog.

1. I agree to provide all necessary treatments at the intervals advised by my veterinarian for this dog. I further agree to obtain prompt veterinary care for this dog in the event the dog becomes sick or injured. I will not allow this dog to suffer unnecessarily.
2. I agree to have this dog under my control when it is not confined to my property. A secured fenced area (radio fences are not acceptable) with shelter from the elements, will be provided for the dog**.**
3. **THE DOG WILL NOT BE TIED OR CHAINED.**
4. If for any reason I cannot keep this dog after the adoption is final, I will notify the Humane Society. I understand that if the Humane Society can take the dog back after the adoption is final, there will be no refund and a surrender fee may be required.
5. I will not abuse or neglect this dog. I authorize the Humane Society at their sole discretion to determine whether the dog has been abused or neglected.
6. I will provide appropriate and adequate training, socialization, and exercise for this dog. If behavior problems develop, I will seek the guidance to correct the problem.
7. I understand that any failure to perform the foregoing agreement will constitute a breach of contract, and that if there is any breach of contract I authorize the Humane Society to reclaim both possession and ownership of the dog at no cost to HSIMC.
8. By signing this document, you attest you are over the age of 18, have provided accurate and truthful information and understand and agree to the terms of this contract. You also agree that any misrepresentation or false information will void this request and adoption. The Humane Society for Inland Mendocino County is not responsible for and cannot guarantee the health, condition, age, breed or disposition of the animal, nor can we be held responsible for disease passed to your existing pets. We strive for permanent placements; however, if this animal is truly not a match, the animal may be returned within SEVEN days for a full money refund. We will always take our animals back, but a refund after seven days will not be provided.
9. I understand that I have SEVEN days in which to take advantage of The Well Pet Exam (if applicable).

We highly recommend that you take advantage of the exam. Anything that you elect to do with the animal at the visit, other than the wellness check will not be covered by the Humane Society, unless the Humane Society has given consent in writing.

**Adopter’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HSIMC Rep: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

For office use only

Current on vaccines \_\_\_\_\_\_ Current on Rabies \_\_\_\_\_\_ Scanned for chip \_\_\_\_\_\_

On medication [ ] No [ ] Yes If so name, dosage, amount of time and reason for medication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has all current medical records [ ] No [ ] Yes

If not, what records need to be retrieved?­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

From: AC\_\_\_Care-A-Van\_\_\_Yokayo\_\_\_East Hill\_\_\_Willits Animal Hospital\_\_\_Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check #\_\_\_\_\_\_\_ Credit Card\_\_\_\_\_\_\_ Cash\_\_\_\_\_\_\_ Amount $\_\_\_\_\_\_\_\_ HSIMC REP\_\_\_\_\_\_\_\_

Any discount applied to adoption? [ ] No [ ] Yes Amount $\_\_\_\_\_\_\_\_\_\_\_

Dog shown by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adoption done by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disclaimer**

The Humane Society for Inland Mendocino County tries its best to have healthy animals available for adoption, however, due to being in a shelter environment many of the animals we take in have been exposed to typical dog and cat illnesses prior to our care. The most common problems we encounter are: Ringworm, Upper Respiratory (cold), Kennel Cough (in dogs), Parvovirus (in dogs), and Giardia or Coccidiosis (diarrhea), Tapeworm and Roundworm. We do our best to monitor every animal for health problems or illnesses while in our care and provide adopters with healthy animals, but some of these illnesses may go undetected at the time of adoption due to various incubation periods.

Symptoms of **Ringworm**: patches of missing fur/dry spots, especially around the face and paws

Symptoms of **Tapeworm**: rice like bits in the stool

Symptoms of **Roundworm**: looks like spaghetti (commonly vomited)

Symptoms of **Upper Respiratory**: sneezing, weepy eyes and stuffy/crusty nose

Symptoms of **Kennel Cough**: persistent coughing

Symptoms of **Parvovirus**: extreme fatigue, throwing up, diarrhea, and blood in the stool

**If you see any of these signs you should call a veterinarian right away.** Many of these are not life threatening and can be taken care of easily with the right medication. **However, Parvovirus is often deadly, especially for puppies, if the dog is not taken to a veterinarian for treatment right away.** Once you have taken care of your animal’s medical needs we ask that you notify the Humane Society of your animal’s illness so that we can notify other adopters and monitor the animals in our care for the illness.

All adopted animals from the Humane Society for Inland Mendocino County are on **a seven day trial visit**. If, for any reason, you want to return the animal during this seven day period you may do so, however ***we ask that you notify the shelter before you bring the animal in*** so that we have time to prepare proper housing accommodations for the animal. **Your adoption fee will be returned, by check within two weeks of the Humane Society receiving a signed surrender form relinquishing the animal to the Humane Society.** During your seven day trial period, if you chose to go to the veterinarian it will be at your own expense, we do provide adopters with a free “Well Pet Exam”, but anything that you elect to do with the animal at the visit will not be covered by the Humane Society, unless the Humane Society has given written consent ahead of time.

We are truly sorry if any inconveniences develop and will do our best to work with you in the event of any problems occurring. Please keep in mind that we do our best to properly care for our animals. Thank you for your understanding and thank you for adopting an animal from the Humane Society for Inland Mendocino County.

I have read and understood the above information.

Adopters Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HSIMC Rep: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_