



Humane Society for Inland Mendocino County

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Website: www.mendohumanesociety.com / Tax ID# 94-2674977

"Our lives are in your hands"

DOG ADOPTION APPLICATION

Name of Dog: _____ ID# _____ Date: _____

PLEASE FILL OUT THIS FORM AS ACCURATELY AND COMPLETELY AS POSSIBLE

Name: _____

Home Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

Home Phone: _____ Cell Phone: _____

1. Do you rent or own? _____
2. Type of housing, House, condo, apartment, other? _____
3. How long have you lived at your current address? _____
4. Why do you want this dog? _____
5. Have you owned a dog before? YES NO
6. Where will the dog be staying? Indoors _____ Outdoors _____ Both _____
7. Describe how the dog will be confined on your property. Do you have fencing? Type of fencing and height? _____
8. Where will the dog sleep at night? _____
9. How many hours will the dog be left alone at your home? _____
10. Do all members of the household want this dog? YES NO
11. Who will be the primary caregiver? _____
12. Will you keep the dog on heartworm and flea/tick prevention? YES NO
13. Helping an animal adjust to a new home is a major undertaking. Please describe how much time will be spent and what activities you will be doing to help this pet adjust to your new home and lifestyle?

14. What behavior do you consider unacceptable?

15. How would you manage this behavior? _____

16. Do you plan to take this dog to any training classes? _____

The Humane Society strongly recommends that you attend training classes with your new dog!

17. Will you provide needed medical treatment and vaccinations for the dog? YES NO

18. How many adults _____ and children _____ live in your home? Do other children visit often?

19. How many animals do you currently have? Dogs ___ Cats ___ Other _____

20. Have you ever had to give up an animal? YES NO If so, why and where did it go?

21. If you cannot keep this dog **you are required to contact** The Humane Society before rehoming.

22. 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? YES NO

I certify that the above information is true and correct. I understand that false information may void this application. I hereby accept possession and title of this dog "AS IS" at my own risk and hereby release and waive 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.

Adopter Signature _____ Date _____
HSIMC Rep _____ Date _____

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. 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 it becomes sick or injured. I will not allow this dog to suffer unnecessarily.

1. I agree to have this dog under my control when it is not confined to my property. A secured fenced area (radio fences are acceptable) with shelter from the elements, will be provided for the dog. **THE DOG WILL NOT BE TIED OR CHAINED.**
2. If for any reason I cannot keep this dog after the adoption is final, I will notify The Humane Society. We ask that when returning a dog that you notify the shelter **BEFORE** bringing the animal in so that we may have time to prepare proper housing accommodation for the dog.
3. 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.
4. I agree not to abuse or neglect this dog. I authorize The Humane Society at their sole discretion to determine whether the dog has been abused or neglected.
5. 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.

6. 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.
7. I understand that the dog covered by these adoption papers is, as far as can be determined by The Humane Society, is in good health. The Humane Society will not be responsible for any medical cost after the adoption is final. I understand that I will be informed by The Humane Society prior to the adoption of **any known** past or present medical or behavioral conditions and accept the dog "AS IS."
8. I agree to give The Humane Society visitation rights to ensure that the terms of this adoption agreement are being observed.
9. I understand that I have **SEVEN** days in which to take advantage of the "Well Pet Exam" (if applicable).
10. I understand that I have **SEVEN** days to return this dog for any reason and will be provided with a refund by check within 2 weeks.

Adopter 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
Name Medication:

Dosage:

Duration of treatment:

Reason for treatment

Has all current medical records [] No [] Yes If not, what records need to be retrieved? _____

From: AC ____ Care-A-Van ____ Yokayo ____ East Hill ____ Mendocino Animal Hospital ____ Other _____
Check # _____ Credit Card _____ Cash _____ Amount \$ _____ HSIMC REP _____
Any discount applied to adoption? [] No [] Yes Amount \$ _____

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), worms, Parvovirus (in dogs), and Giardia or Coccidiosis (diarrhea). 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 or dry spots, especially around the face and paws

Symptoms of Upper Respiratory: sneezing and weepy eyes

Symptoms of Kennel Cough: persistent coughing

Symptoms of Parvovirus: listlessness, 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", 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.

Thank you for adopting an animal from the Humane Society for Inland Mendocino County.

I have read and understood the above information.

Adopter/s: _____ Date: _____
HSIMC Rep: _____ Date: _____