



## DOG ADOPTION CONTRACT

Animal Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Age Estimate: \_\_\_\_\_ Color/Markings: \_\_\_\_\_

Sex (CIRCLE):    Male            Female

### **As Adopter, I agree to the following:**

- To take the animal(s) I am adopting to my primary veterinarian within 30 days of adopting for a well-check.
- To allow a representative of Tri-County Animal Shelter to visit my premises to insure the terms of this agreement have been kept.
- The animal **MAY NOT** and **CAN NOT** be kept strictly outdoors.
- The animal **MAY NOT** be kept on a chain.
- The animal will be provided with adequate fresh food and water, clean, dry shelter when outside, and daily exercise.
- To provide a safe collar with rabies and ID tags to be worn at all times.
- To obey all applicable laws governing control and custody of animals.
- To provide all medical care and treatment needed by the animal including but not limited to: yearly medical checkups, vaccines, and preventative heartworm/flea medication.
- To adopt the animal only as a personal pet/companion and not as a gift, working animal, or guard dog.
- The animal is not to be sold or given away for any reason. If it becomes necessary to find the animal another home, Tri-County Animal shelter will be contacted and the animal shall be returned to them.
- The animal will be spayed/neutered at the time of adoption. The animal will be altered at one of our partnering veterinarians at the discretion of Tri-County Animal Shelter.

**Tri-County Animal Shelter assumes no responsibility nor shall they be held liable for any damages caused by the adopted Animal to property, person or other pets. **If any medical problems should occur after adoption, Tri-County Animal Shelter is not liable for any medical bills.****

**As the Adopter, I agree to accept full responsibility for the care of this animal releasing the previous owner as well as Tri-County Animal Shelter and its representatives of any liability from this date forward.**

**I agree to abide by the adoption conditions and realize that I am committed to this animal for his/her life. I have read and fully understand that Tri-County Animal Shelter may repossess this animal at any time if the adoption conditions are violated or the animal is mistreated.**

Do you own or rent your home?  Own  Rent

**\*If you rent you MUST provide written proof from your landlord that you are allowed to have a pet and any applicable pet fee has been paid.\***

This adoption contract is entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2024,  
between Tri-County Animal Shelter

Adopter's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone:(\_\_\_\_) \_\_\_\_\_ Cell Phone:(\_\_\_\_) \_\_\_\_\_

Adoption Fee: \$ \_\_\_\_\_ Cash  Check

Email: \_\_\_\_\_

**\*\*There may be additional charges at the veterinarian's office\*\***

Signature of Adopter: \_\_\_\_\_

Tri-County Animal Shelter Rep. Signature: \_\_\_\_\_

**THANK YOU FOR ADOPTING AND SAVING A LIFE!**

**\*\*\*\*ADOPTION FEES ARE NON-REFUNDABLE\*\*\*\***

