



# PAWS FOR THE CAUSE



## ADOPTION APPLICATION

DATE: \_\_\_\_\_ PET'S NAME: \_\_\_\_\_ ID #: \_\_\_\_\_

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CHILDREN IN HOME: \_\_\_\_\_ IF SO HOW MANY: \_\_\_\_\_ AGE OF CHILDREN IN HOME \_\_\_\_\_

VET REFERENCE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

NON-FAMILY REFERENCE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

### ARE THERE OTHER PETS IN YOUR HOUSEHOLD:

DOG(S): \_\_\_\_\_ MALE/FEMALE: \_\_\_\_\_ SPAYED/NUETERED: \_\_\_\_\_ AGE(S): \_\_\_\_\_

CAT(S): \_\_\_\_\_ MALE/FEMALE: \_\_\_\_\_ SPAYED/NUETERED: \_\_\_\_\_ AGE(S): \_\_\_\_\_

OTHER ANIMALS IN YOUR HOUSEHOLD: \_\_\_\_\_

DOES ANYONE IN YOUR IMMEDIATE FAMILY SUFFER FROMN ALLERGIES: \_\_\_\_\_

HAVE YOU EVER OWNED/ADOPTED ANY ANIMALS: \_\_\_\_\_

DO YOU OWN OR RENT: \_\_\_\_\_ IF RENT, LANDLORD'S NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

WHERE WILL YOU KEEP THE ANIMAL MOST OF THE TIME: \_\_\_\_\_



\_\_\_\_ I agree to keep an I.D. and rabies tag attached to a properly fitted collar which will remain on the animal at all times and to obtain all licenses required by local authorities within two weeks. I will also keep these on the animal at all times.

\_\_\_\_ I agree to provide the animal with regular veterinary care and all necessary inoculations at intervals advised by my vet. AI will also obtain immediate veterinary care should the animal become ill or injured.

\_\_\_\_ I will not trade, sell or give away or transfer ownership of this animal

\_\_\_\_ If for any reason I am unable to keep the adopted animal, I agree to contact an adoption consultant regarding possible return options. I will be contacted within 48 hours to discuss the reason for my return. I understand PAWS for the CAUSE does not guarantee to accept the adopted animal as a return. In the event the animal is not accepted as a return, they will work with me to place the animal. Only animals with health records and up to date medical information will be considered for return. I also agree to fill out a "Return Adoption" form to assist with placement in a new home.

\_\_\_\_ I understand the animal, as much as can be determined by Paws for the Cause, is in good health and Paws for the Cause is not responsible for any medical fees after the adoption date. However, if a routine health problem should occur during the first seven (7) days, I should contact Paws for the Cause to discuss the matter.

\_\_\_\_ I agree not to abuse or in any way neglect this animal and to provide safe, humane and comfortable accommodations. I will not keep this animal tethered outside unattended or leave in any space not usually occupied by my family. Paws for the Cause recommends an indoor lifestyle for cat's health and safety.

\_\_\_\_ I agree to give agents of Paws for the Cause visitation rights to guarantee terms of this agreement are being observed. I understand agents of Paws for the Cause may, without notice, make inquiries about the animal at any time and upon finding I have violated any of the foregoing conditions, may reclaim ownership of animal.

\_\_\_\_ I agree to abide by all applicable state, county, city and other local laws and ordinances governing ownership of animals including without limitation, ownership of any type of breed and/or animal considered by existing law to be "dangerous and/or vicious".

\_\_\_\_ I understand although Paws for the Cause may have conducted an assessment of this particular animal, the assessment is limited to general observations, and it should not be relied upon as a definitive opinion or recommendation as to the disposition of the animal or suitability of the animal in a particular environment (such as a home with children, other dogs or other pets).

\_\_\_\_ **The adoption fee is non-refundable.**

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WAIVER AND RELEASE

Paws for the Cause



I hereby fully and forever waive, release, hold harmless, indemnify and defend, Paws for the Cause, it's representatives, and their respective employees, volunteers, agents, officers, board members, trustees, successors and assigns, together with their insurance carriers (collectively Paws for the Cause), from and against, any and all accidents, claims, demands, causes of actions, lawsuits, expenses or damages of every nature whatsoever, which I may have now or in the future against Paws for the Cause, for any and all personal injuries, property damage, injuries to the animal or other pets and other damages, known and unknown, arising out of my adoption of animal(s) from Paws for the Cause.

By my signature below, I voluntarily agree to assume and/or incur all risks of loss, impairment, damage or injury of whatever kind, including death, that may be sustained or suffered in connection with my adoption of animal(s) from Paws for the Cause whether or not due to, in whole or in part, the acts, omissions, negligence or other fault of Paws for the Cause.

I, the undersigned, have read this waiver and release and understand all of its terms, and I execute it voluntarily and with full knowledge of its significance.

**I ACKNOWLEDGE I HAVE RECEIVED FROM PAUSE FOR THE CAUSE. THE ANIMAL DESCRIBED ABOVE. I HAVE READ ALL OF THE TERMS OF THIS ADOPTION CONTRACT, INCLUDING WITHOUT LIMITATION, THE REPRESENTATIONS, WAIVER AND RELEASE, AND I AGREE TO ABIDE BY THE TERMS OF THIS ADOPTION CONTRACT.**

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Signature of adopter

Date

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Signature of Pause for the Cause representative

Date

Adoption Fee \$ \_\_\_\_\_