AFAR Printable ANIMAL ADOPTION CONTRACT

Advocates For Animal Rights, hereinafter referred to as AFAR, and ________________________________ hereinafter referred to as adopter, in consideration of the terms, conditions, and promises set forth in this agreement, intending to be legally bound by this agreement, agree to the following terms and conditions:

The Animal: AFAR is conditionally placing the following described animal with me, the Adopter, for adoption as a companion animal.

Pet’s Current Name ______________________ Type/Breed_____________________ (Male or Female)

Color/Markings _____________________ Approximate Age___________ Spayed ____ Neutered______

Microchip number if applicable _________________________

2. Adoption Fee _______ (Initial) AFAR requires an adoption donation of $______, for the animal, to help defray expenses for the animal’s food and veterinary care. The adoption donation is not a fee or sale price and is not refundable under any circumstances, except as stated in 2b (below). Any violations of the terms and conditions of this contract that result in the return of the animal will result in no return of the adoption donation.

   a. _______ (Initial) The animal you are adopting deserves to be part of your family and everyday life. If your new animal is not who you hoped they would be, with this contract, you agree and have to return the animal to AFAR within the first 7 days in the same condition the animal was in on the adoption date.

   b. _______ (Initial) The adoption donation will be returned ONLY if AFAR is informed within the 7 day period following the adoption, that the animal is not suitable for you or any family member(s). This period may be extended, providing AFAR is informed by the Adopter before the end of the 7 day period.

3. No representations. _______ (Initial) You understand that this animal was previously unwanted, a stray, or lost and may have been rescued by AFAR from unknown circumstances. You agree that AFAR is making no representations or warranties about the condition, personality, or temperament of the dog.

4. Health ________(Initial) If the animal becomes sick and requires veterinary care within the 7 day trial period, you agree to inform AFAR so that arrangements can be made to have the animal seen by AFAR’s veterinarian, or you may opt to return the animal to AFAR, and receive a refund of your adoption fee. AFAR will not be held liable for any veterinary costs incurred by the adopter without prior consent from AFAR. I understand that every effort is made to offer for adoption, only healthy, even-tempered animals. However, animals are only available for observation by AFAR for a short time, and therefore, no guarantees, nor implied or expressed warranties with regard to this animal is made. I understand and agree that it is my responsibility to carefully choose the animal I am adopting and that no guarantees are made regarding the health, temperament, or training of animals for adoption. The animal is adopted “AS IS”. I understand and agree that AFAR shall not be liable, in whole or in part, for any personal injury or property damage caused by this animal, or for any injury or illness of this animal, once possession is assumed by the Adopter. The Adopter, hereby, agrees to assume all liability for the animal’s care and any injury or damage done by the animal.

5. Care of the animal ________ (Initial) I agree that I am adopting this animal as a family pet and that the animal will live inside my home, not outdoors. The animal will be given extensive house privileges, i.e., sleep inside the house, be allowed freedom of the house when the family is home and will not be primarily restricted to the yard. During times of extreme heat or cold, the animal will be kept inside. The animal is not to be chained or tethered at any time, and the animal may not under any circumstances be crated or otherwise confined for more than 8 hours in a 24 hour period. If crated the crate shall be large enough for the animal to stand and to lie comfortably on their side. I agree to provide the animal with fresh water, wholesome food, adequate outdoor exercise (if appropriate), adequate shelter, appropriate veterinary care, and plenty of love and attention.

6. Identification. _______ (Initial) I agree to keep proper identification on the animal at all times, and to license the animal (if necessary) in accordance with local laws.

7. Transfer. ________ (Initial) I agree that at any time in the future if I am unable to keep the animal, to return the animal to AFAR, and that I will not sell, give away, or turn in the animal to any other Animal Shelter or rescue.

8. Training. _______ (Initial) If adopting a puppy, I agree to enroll them in an appropriate puppy training class and to provide AFAR with appropriate evidence that the puppy has successfully completed the course by ________.

9. Home Visits. ________ (Initial) I agree to have a representative of AFAR visit my home prior to, and after the adoption to ensure that the home is appropriate, and agree to allow a representative of AFAR visit your home at
any time in the animal’s lifetime. (If you are adopting a puppy, AFAR will require a minimum of one pre-adoption visit and at least one subsequent visit). If in the judgment of an AFAR representative, the animal is not being properly cared for, abused, mistreated in any way, or if any of the terms of this contract have been breeched or violated, AFAR can and will reclaim this animal and this will not be judged terms of trespass.

10. Change of address. ______ (Initial) In the event that I change my phone number or address, I agree to immediately inform AFAR of my new contact information.

11. Adoption Application. ______ (Initial) I understand that the adoption application I have filled out will became part of this contract, and that the application then becomes part of our contract.

12. Breach of Agreement. ______ (Initial) In the event that AFAR makes the determination (in AFAR’s sole discretion) that I have failed to comply with any of the terms of this Agreement, or the animal is abused or neglected in any way, one of AFAR’s solutions will be to immediately recover the animal from me upon demand and I will, without hesitation, surrender the animal immediately. I agree to pay all costs necessary to enforce this agreement including reasonable attorney’s fees, costs of litigation, and animal recovery fees. This agreement shall be governed by the laws of the state of Michigan, and any action brought to enforce this agreement shall be brought to Michigan’s court system.

12. No Liability. ______ (Initial) Neither AFAR, its volunteers or its Officers is liable to me for any claims, legal actions, losses, injuries, damages, costs, expenses, or liabilities whatsoever in connection with your adoption or ownership of the animal.

13. ________ (Initial) All animals are sterilized and current on their vaccinations prior to adoption, (and if old enough) have received a rabies shot. I have received a copy of the spay/neuter certificate and shot record.

14. Follow up.______ (Initial) I understand that an AFAR’s representative will contact me for a follow up visit, to see how the adoption is going, and to address any concerns I might have within the next 14 days. The best time to reach me is _________________________ at (          ) _____________________.

I have read and received a copy of this application, and hereby agree to abide by all the terms and conditions of this agreement. I certify that I am at least 18 years of age. I agree that all statements I have made on this form are accurate and true. If it is found that any statements I have made on this form are not true, the adopted animal may be confiscated.

THE ADOPTER'S (and Co-Adopter) HOME AND CONTACT INFORMATION

Adopters’ Name: _____________________ Phone # ____________________ Mobile # ____________________

Driver’s License or ID # ________________________________

Co Adopters’ Name____________________ Phone # ____________________ Mobile # ___________________

Drivers’ License or ID # ________________________________

Address: _____________________________________________ City:  ________________________________

State: _________  Zip Code: _________ Adoption donation $__________ paid by Check # ________ or Cash

Signature of Adopter ___________________________________________ Date ________________________
Signature of Co-Adopter ________________________________ Date ______________________

Signature of AFAR Representative ______________________________ Date ______________________

Pre-adoption Home Inspection completed by ______________________ Date ______________________

Pre-adoption Notes
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Post-adoption Home Inspection completed by ______________________ Date ______________________

Post-adoption Notes
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Post-adoption Home Inspection completed by ______________________ Date ______________________

Post-adoption Notes
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