

*Bull Luv Able Paws And Chi
Wawas Rescue Adoption Contract*

Personal Information:

Name: _____

_____ *Home Phone:*

_____ *Cell #:* _____

DL Number: _____ *State Issued*

Spouse's Name (if applicable):

How many children in your home? _____

Ages: _____

Are there any others residing in your home?

Please List

Employer Name:

Phone: _____ *Employer*

Address: _____

How long have you been there? :

Residential Information:

Home Address:

Is this where the pet will live with you? _____

How long have you resided at this address?

If less than two years, what was your previous address?

Do you Rent or Own? _____ Apartment?

_____ House? _____ Condo? _____

If renting, what is your Landlord's name?

Landlord's Phone Number:

Have you received permission from your landlord?

Your Veterinarian's Name:

City: _____

Phone Number:

*Please list Three (2) References that you have known for at
least Five (5) Years*

(1)

Name _____

Address _____

Telephone _____

Relationship _____

Years Known _____

(2)

Name _____

Address _____

Telephone _____

Relationship _____

Years Known _____

What dog are you adopting from BPR?

Please Read and Initial next to each clause below:

_____ **I am 21 years of age or older.*

_____ **I have been advised of upcoming and annual necessary immunizations. It is advised that I take the animal to a veterinarian within 14 days of adoption for a general physical examination. I will provide annual veterinary checkups, keep immunizations current, and properly administer heartworm preventer monthly.*

_____ **I will take the animal to a veterinarian within 14 days of adoption for a general physical*

examination and any necessary vaccinations, deworming, medications or medical treatment provided then is at my own expense. A copy of the most recent vaccination record and medical treatment (if applicable) is provided from your dog's foster parent, once your contract is signed and your fees are paid.

_____ **I will contact my new dogs microchip company within 3 days of adoption and change ownership of said microchip.*

_____ **I understand that dog food provides a properly balanced diet and agree to feed the dog only a nutritious dog food and snacks made just for dogs. I will keep fresh water available at all times.*

_____ **Our new adopted dog will never be allowed to run loose in an unfenced yard or acres without fencing. The*

dog will be part of the family and kept primarily in the house except for potty breaks and daily walks (particularly at night). When the dog is outside of the house, it will be kept in a fenced area (not a small, restrictive kennel unless it is being boarded)

**I will provide a humane environment, regular exercise, and companionship for my pet. I agree not to strike the dog with my hand or any other object; I will learn to discipline the dog with my voice. If I have disciplinary problems with this dog, I will seek the advice of a training professional.*

**I may return the animal for an exchange within 14 days for a previously undiagnosed health reason verified by 2 OPINIONS of a licensed veterinarian, provided at my own cost. Bull-luv-able Paws and Chi Wawas Rescue does not reimburse for medical bills. I may return the animal within 14 days with*

no return of the adoption fee as the home trial is the basis for what will come of the dog in our home. I understand this to the fullest.

_____ **I understand Bull-luv-able Paws and Chi Wawas Rescue does not reimburse for medical bills and cannot guarantee the health of any dog post adoption. Any unforeseen medical condition(s) that require treatment will be the responsibility of the adopter.*

_____ **I understand and agree that Bull-luv-able Paws and Chi Wawas Rescue makes no express or implied warranty, representation, or promise to the age, health, breed, habits, or safety of the animal. I hereby accept the animal as is, assume all risks and responsibilities associated with the ownership of the Animal, including bites, and I hereby fully and completely release, indemnify and hold harmless the Bull-luv-able Paws and Chi Wawas Rescue, its*

directors, officers, volunteers, servants, and employees from any claim, cause of action or liability of any sort or nature, whether known or unknown, directly or indirectly arising out of or in connection with the adoption, care or ownership, maintenance, temperament or condition of the Animal

**If EVER, your adopted dog has to be relinquished, he or she MUST be relinquished to Bull Terrier Paws Rescue. He or she will never be given to an animal control or shelter of any kind or other rescue. You are able to find an appropriate family member, friend, etc who would be a better home but you MUST let BPR know this is the case. BPR may require up to 4 weeks to find a suited foster home for your pet.*

_____ **If a tragedy happens, and we can no longer care for our adopted dog, he or she will once again become a part of Bull lov able Paws and Chi Wawas Rescue*

_____ **I acknowledge that I have read and fully understand the terms and conditions of the foregoing adoption contract and that I will comply with the same.*

PLEASE PROVIDE THE FOLLOWING

INFORMATION: *When our family goes on vacation, is ill or has an emergency situation, adopted pet will go to*

Printed Name (Adopter)

Adopter Signature

Date

Printed Name (Rescue Representative)

Rescue Representative Signature

Date _____

Adoption fee

Donation (tax-deductible)

Total -
