

**Animal Health Center
1520 2nd Avenue
Opelika, AL 36801**

Pet Adoption Contract

New Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) - _____ - _____

Animal Name: _____ Color: _____

Species: _____ Gender: _____

Breed: _____ Age: _____

Microchip: _____ Weight: _____

Adoption Agreements

I agree (please initial each statement):

____ Animal Health Center cannot guarantee the health or temperament of any animal adopted.

____ My adoption fee is NONREFUNDABLE.

____ To provide proper and adequate food, water, shelter, exercise, and grooming for this pet and to treat him/her humanely at all times.

____ To obey local licensing and confinement laws.

____ Not to sell, give away, or use this animal for experimental purposes, allow him/her to engage in any dog or cat fighting or pursue any attack dog training.

____ That if it is determined this pet has not been neutered or spayed, I will have him neutered or spayed before he/she reaches nine months of age, if he/she is not an adult, or within 2 months if he/she is an adult.

____ That my place of residence allows for ownership and occupancy of the pet I am adopting.

I acknowledge that (please initial each statement):

____ I have been informed all animals can carry and transmit diseases, some of which affect people (including bacteria, viruses, parasites, and ringworm), and these diseases may be undetectable in what appears to be a healthy animal at the time of adoption.

____ I am aware pets may exhibit normal but potentially undesirable behaviors, including, but not limited to, aggression, house soiling, biting, scratching, barking, etc., and that these normal behaviors may be difficult to manage. No one at the Animal Health Center has told me this pet will not engage in any of these potential behavior patterns.

____ Animal Health Center is in no way responsible for any damage the animal may inflict on another person, my property, or the property of another, and no attempt will be made by me to hold the Animal Health Center responsible.

____ I accept the animal as it is at the time of adoption and understand Animal Health Center is not responsible for any medical conditions not readily detectable prior to or at the time of adoption or discovered after said adoption.

____ I have read this agreement and release Animal Health Center from any present or future liability associated with my adoption of this animal.

____ For cats and kittens - I understand the animal listed above has not been tested or vaccinated for feline Leukemia Virus.

____ I understand that this adoption fee is \$175 and includes the following:

- Rabies Vaccination #1
- DA2P4L-CPV Vaccination #1 for dogs or FVR2CP+C Vaccination #1 for cats
- Spay or Neuter Surgery
- Microchip

Signature of Adopting Owner _____
Date

Signature of Employee/Witness _____
Date