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Date: \_\_\_\_\_

## Adoption Application & Contract

Please initial on the line next to each item to acknowledge you have read and agree to abide by it.

Jasper Animal Rescue Mission (JARM) only adopts pets to self-sufficient adults (over the age of 18) who demonstrate that they are responsible persons and can give adequate assurances that they intend to provide proper care for this animal's entire life (15-20 years). **My age is** \_\_\_\_\_. Please present your driver's license for verification.

\_\_\_\_\_ Proper care includes:

- Proper diet and fresh water
- Safe, comfortable shelter from the elements and potential dangers
- Ongoing routine medical care, to include all appropriate vaccines as required, heartworm and flea and tick prevention, and emergency veterinary care
- Keeping proper identification on pet and complying with licensure laws
- Adequate training and supervision
- Daily exercise and companionship

\_\_\_\_\_ I will diligently attend to the health and welfare of this pet, providing vaccinations and heartworm prevention treatment along with medical care and regular checkups by a licensed veterinarian.

\_\_\_\_\_ I understand that JARM is not responsible for the health or behavior of this animal after I accept ownership. There is no guarantee given or implied and no refund will be offered.

\_\_\_\_\_ I understand that the cost of caring for this pet can range from \$500 - \$700 *minimum a year*.

\_\_\_\_\_ I have never abused or neglected an animal.

If I am adopting a cat or kitten, I promise to **never declaw** the feline.

\_\_\_\_\_ If I am adopting a dog or puppy, I promise to **never leave** the canine **alone while chained outside**.

\_\_\_\_\_ I am not adopting this pet to be given to another person who is unaware of the adoption.

My residence allows pets of this breed and I am responsible for this Pet Deposit Amount: \_\_\_\_\_.

\_\_\_\_\_ I will take my newly adopted pet to my veterinarian's office for confirmation of their health within a week of this adoption. JARM strongly recommends a wellness check-up which should include: de-worming, heartworm prevention, and flea/tick prevention.

\_\_\_\_\_ This is an adoption, NOT A SALE, and JARM reserves the right to postpone, refuse, or rescind any adoption. JARM may also perform unannounced home visits.

\_\_\_\_\_ \$100.00 (one hundred dollar) adoption donation for cats/kittens.

\$125.00 (one hundred twenty five dollar) adoption donation for dogs/puppies.

\_\_\_\_\_ Additional charges may apply if the adoption donation is paid using a credit or debit card.

\_\_\_\_\_ The adoption donation is NOT refundable.

I understand that the adoption donation includes 30 days free pet insurance (if an e-mail address is provided), the cost of age-appropriate vaccinations (including rabies), spaying or neutering, and a microchip. If not previously performed, all necessary shots to complete a series may be purchased from JARM after the adoption for a donation of \$20.00 (twenty dollars) per shot. Once the initial series is complete, I must take the animal to a veterinarian for continued care.

\_\_\_\_\_ Spaying/neutering is a requirement of this adoption and this facility. NO EXCEPTIONS.

If not already performed, the spay/neuter surgery will be scheduled as soon as possible after the adoption. If I choose to take this pet home before the scheduled appointment, I will give JARM a \$100.00 (one hundred) refundable deposit to ensure the return of this pet on the day before the scheduled surgery date. JARM will make every effort to have this pet spayed/neutered in a timely manner and the deposit will be returned to the customer upon the completion of the scheduled spay/neuter surgery. If I do not bring this pet back to JARM on the day before the scheduled surgery date, JARM has the right to retain the surgery deposit.

\_\_\_\_\_ Surgery deposits are accepted in the form of cash, check (will not be cashed unless the animal is not presented for surgery), or credit card (will not be charged unless the animal is not presented for surgery). Debit cards will NOT be accepted for surgery deposits.

\_\_\_\_\_ If I choose to have my veterinarian perform the spay/neuter surgery, I understand that the cost of the surgery performed by my veterinarian is at my own sole expense. I will have my veterinarian contact JARM with the anticipated surgery date. If the pet will be past a certain age on the anticipated surgery date, my veterinarian will also submit a letter to JARM explaining the reason for the delay. I will not receive any discount on or reimbursement of the adoption donation paid to JARM.

\_\_\_\_\_ I understand that if I am no longer able to care for my pet I must either return this pet to JARM or advise JARM of the new owner. Please provide current veterinarian records, rabies tag, and microchip tag, as appropriate.

Special Conditions or Other Agreements: \_\_\_\_\_

**I have read and understand all of my obligations regarding this adoption and the welfare of the animal. I certify the information on all five pages of this application and contract to be true and I understand that any false information may result in cancellation of the adoption.**

\_\_\_\_\_ Applicant Signature

\_\_\_\_\_ Spouse/Partner Signature

Date \_\_\_\_\_

Approved by: \_\_\_\_\_  
JARM Representative

JARM Pet ID: \_\_\_\_\_ Pet Name: \_\_\_\_\_

**Copy the first two pages of this application and give to the adopter. If the adoption is done off-site, the JARM office will copy and mail the two pages along with the PetPoint paperwork to the adopter.**

**JARM Use Only:**

Checked DNA? Yes / No (circle one)

Adoption Location: JARM / Petco / PetsMart,Beau / Petsmart,Bluf / BB Thrift / Other

Pet's Name \_\_\_\_\_ Pet ID#: \_\_\_\_\_

Breed \_\_\_\_\_ Approximate DOB \_\_\_\_\_

Sex: \_\_\_(F)/Spayed \_\_\_(M)Neutered \_\_\_ M / F not Spayed/Neutered

Receipt# \_\_\_\_\_ Amount \_\_\_\_\_ Appr#/Chk# \_\_\_\_\_

**Personal Data: Adopter: Please complete the remaining pages, Please Print**

Name: \_\_\_\_\_ Spouse/Partner's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #'s: \_\_\_\_\_

Emergency contact: Name \_\_\_\_\_ Phone # \_\_\_\_\_

Please **Print** your e-mail address to be legible for 24PetWatch and/or JARM to contact you.

E-mail Addresses: \_\_\_\_\_

Are you: Working \_\_\_ Retired \_\_\_ Attend School \_\_\_ Other \_\_\_\_\_

Employer \_\_\_\_\_ Employer's Phone: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Drivers License # \_\_\_\_\_ DL # Verified by JARM Representative \_\_\_\_\_  
State \_\_\_\_\_

Spouse/Partner's Employer: \_\_\_\_\_

Spouse/Partner's Employer's Phone: \_\_\_\_\_

Method of Payment: Credit Card / Cash / Check If CC, Transaction Approval # \_\_\_\_\_

Your pet's microchip information will be registered with 24PETWATCH pet recovery database.  
Please choose one of the following options:

\_\_\_ Yes, I consent to the release of my name and telephone number to anyone who finds my pet.

\_\_\_ No, I prefer that communications be only through 24PETWATCH.

Have you ever adopted from us before? Yes \_\_\_ No \_\_\_ If yes, when \_\_\_\_\_

How did you hear about JARM? Word of mouth (who) \_\_\_\_\_

Walk-in \_\_\_ Adoption Event \_\_\_ Newspaper \_\_\_ PetFinder \_\_\_ Adopt-A-Pet \_\_\_ Hardeeville TV \_\_\_

Pinterest \_\_\_ Other (explain) \_\_\_\_\_

**Household Information:**

List names and ages of **all individuals** living in household (including yourself):

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please use back of page to add more names living in your household if needed.

Do you: Rent: \_\_\_\_\_ Own: \_\_\_\_\_ Military On Base: \_\_\_\_\_ Off Base: \_\_\_\_\_

Landlord's Information: \_\_\_\_\_ Pet Deposit Amount: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Reason for adopting: Family pet \_\_\_\_\_ Companion for another animal \_\_\_\_\_

Other (explain) \_\_\_\_\_

Have you had a pet before? \_\_\_\_\_ Where is that pet now? \_\_\_\_\_

Please list all other pets in this household, including ages and sexes:

Type of animal \_\_\_\_\_ Age \_\_\_\_\_ Yrs / Mos (circle one) Sex \_\_\_\_\_

Type of animal \_\_\_\_\_ Age \_\_\_\_\_ Yrs / Mos (circle one) Sex \_\_\_\_\_

Type of animal \_\_\_\_\_ Age \_\_\_\_\_ Yrs / Mos (circle one) Sex \_\_\_\_\_

Please use back of page to add more animals living in your household if needed.

Are all other pets spayed or neutered? \_\_\_\_\_

If not, please explain: \_\_\_\_\_

Please list Veterinarian used for annual check-ups: \_\_\_\_\_

What type of heartworm / flea & tick preventative is currently being used: \_\_\_\_\_

\_\_\_\_\_

Please describe any concerns or reservations you may have about adopting this pet: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will your pet live inside or outside? \_\_\_\_\_ If outside, what shelter will be provided? \_\_\_\_\_

\_\_\_\_\_

Number of hours pet will be left alone: \_\_\_\_\_

Where will the pet be kept during the day? \_\_\_\_\_

Where will the pet be kept during the night? \_\_\_\_\_

What kind of discipline/correction will you use with your new pet?

\_\_\_\_\_

If you had to move what would you do with your pet? \_\_\_\_\_

Who will care for your pet if you are unable to? \_\_\_\_\_

In the event of a hurricane evacuation what would you do with your pet(s)? \_\_\_\_\_

\_\_\_\_\_

**Answer only if adopting a dog:**

How do you plan to potty train your dog/puppy: (since the dog(s) have lived in the shelter for a while they need to be retrained to be housebroken)?

\_\_\_\_\_

If crated inside, what is the longest period the dog will be left in crate? \_\_\_\_\_

Will the dog have a fenced yard or be exercised on a leash? \_\_\_\_\_

Will the dog EVER be kept tied up or on a chain? \_\_\_\_\_

Will the dog receive heartworm prevention? \_\_\_\_\_ Flea & tick prevention? \_\_\_\_\_

Will you be enrolling your dog/puppy in obedience school? Yes \_\_\_\_\_ No \_\_\_\_\_