

Name _____

Number _____



Application and Agreement

Name _____ Address _____

City, State, Zip _____ Phone _____

Employer _____ Phone _____

Ages of Children _____ Are you over 18? _____

Have you ever been arrested or convicted of a felony? _____

Is this pet for: You _____ Family _____ Gift _____

Who will care for the pet? _____

Do you rent _____ or own _____ your place of residence?

If rent, landlord's name and phone number _____

If own, house ___ mobile home ___ farm ___ acreage ___ Apartment ___

Do you have a completely fenced yard? _____ or be leashed? _____

Will the pet be primarily an indoor pet _____ or outdoor _____

On a normal day, how many hours will this pet be alone? _____ How many hours a day can you devote to your new pet? _____

Do you currently own pets? _____ Describe (breed, spayed or neutered, current vaccinations?) _____

Who is your current veterinarian? List clinic name, city and phone _____

Please list any veterinary clinics you have worked with in the last 5 years (name, city & phone) _____

Please list two additional references and phone numbers _____

If you move, what will you do with your pet? _____

How will you discipline your pet? _____

Animal No. _____

Date _____

For, and in consideration of, receiving custody of the below described animal from the Aberdeen Area Humane Society, I, the undersigned, hereby agree that I shall:

- Care for the animal humanely and not allow it to run at large or become a nuisance
- License it, and provide other treatment in accordance with the laws of the State and Municipality in which I reside
- Retrieve it from the Animal Control Center if notified to do so
- Not allow the animal to become the subject of medical or any other type of experimentation

I grant the Society the right to inspect the premises where the animal is to be kept, and I agree that if I breach this contract, or if the Society is, for any reason dissatisfied with the conditions surrounding the animal, the Society may repossess the animal from me or from any person who has custody of it.

I agree to provide veterinary care for this animal and keep current on vaccinations. I further understand that the animal is in good health to the present knowledge of the Society, but that no expressed or implied warranties concerning the health of the animal has been made to me.

Type of Animal _____

Sex _____

Description _____

Age _____

MEDICAL HISTORY NPAH 605-226-3816

DA2PPCV: _____

FeLV/FIV Test: _____

Bordetella: _____

CVR-C: _____

Rabies: _____

Dewormed: _____

Dewormed: _____

Frontlined: _____

Frontlined: _____

Vet Check: _____

Adoption Fee _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for denial of application.

Name _____ Phone _____

Address _____ City _____ State ____ Zip _____

Signature _____ Employee Signature _____

Owners are allowed a two-week period in which they may return the adopted animal. Refunds and exchanges will be made at the shelter's discretion. On all refunds, there is a \$25.00 processing fee which will be withheld from the adoption fee at the time of the refund. Refunds will be given within 30 days.