



**PARADISE
Animal Rescue**

Animal Name:	Master Number:
--------------	----------------

2266 North Lapeer Road
Lapeer, MI 48446
(810) 969-4455
(810) 969-4476 fax
www.parpets.org

ADOPTION CONTRACT

I agree to the following:

- I have considered the daily responsibilities and am willing to provide a loving, safe, healthy, clean **environment** for my new pet.
- I have considered my pet's life expectancy and am willing to provide it a **permanent** home. I understand that this pet is a living creature and not a "throw away" item.
- My new pet will live **indoors**. When outside, I will keep my pet contained to my property without chaining it to an object for extended periods of time. I will keep identification on my pet at all times.
- I will provide **veterinary care**, including medical treatments, vaccinations, parasite control and prevention (rabies, heartworm, fleas, distemper, etc).
- I will provide my new pet with clean, fresh **water** and nutritious **food** in sufficient amounts on a daily basis.
- I will **not** have my pet's ears or tail cropped. I will **not** have my cat declawed and understand that I must provide proper scratching surfaces.
- I understand that all animals require training and patience to prevent chewing, scratching, and soiling in the house. I will provide proper and humane **training**.
- If for some reason, I can no longer care for my pet, I will make arrangements to **return** it to Paradise Animal Rescue as soon as possible.
- I understand there are **no guarantees** regarding health, temperament, or the training of this animal.
- I accept that I am adopting my new pet "**as is**" and assume all risk of ownership, including personal injury and property damage. Therefore, I fully release Paradise Animal Rescue from any claim, cause of action, or liability for injury or damage to any person or property that may be caused by my newly adopted pet.
- I understand that if I do not fulfill the commitment to my pet and breach this contract in any way, Paradise Animal Rescue has the right to **reclaim** the adopted animal with NO REFUND.

<i>Copy of Driver's License attached.</i>	<i>Foster Addendum attached? ___ Y ___ N</i>
Adopter Name:	Phone Number:
Adopter Signature:	Date:
Address:	Zip Code:
Email:	Payment: ___ Cash ___ Check
PAR Representative:	Date:



**PARADISE
Animal Rescue**

2266 North Lapeer Road
Lapeer, MI 48446
(810) 969-4455
(810) 969-4476 fax
www.parpets.org

Animal Name:	Master Number:
Date:	

ADOPTION/FOSTER APPLICATION

PERSONAL INFORMATION		
Primary Adopter:	Secondary Adopter:	
Street Address:	City, State, Zip:	
Email Address:		
Home Phone:	Cell Phone:	
Drivers License Number:	Date of Birth:	
Primary Adopter's Occupation:		
How long at present address?	Do you: <input type="checkbox"/> own or <input type="checkbox"/> rent?	
If you rent, landlord's name:	Landlord phone:	
Do you live in: <input type="checkbox"/> Apartment <input type="checkbox"/> House <input type="checkbox"/> Condo <input type="checkbox"/> Mobile home park		
Are there any pet restrictions?		
How many people reside in your home? Adults <input type="text"/>	Children <input type="text"/>	Ages of children:
Does anyone in your home have allergies to dogs/cats? <input type="checkbox"/> yes <input type="checkbox"/> no		
If you move in the future, what will you do with your dog/cat?		
Is everyone in your home aware that you plan to adopt this dog/cat? <input type="checkbox"/> yes <input type="checkbox"/> no		
Are they in agreement?		

Please list two personal references:		
Name:	Phone:	Relationship:
Name:	Phone:	Relationship:

CAT Adopters only:
Will the cat live <input type="checkbox"/> Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both
What would you do if the cat stopped using the litter box?
Are you considering declawing? <input type="checkbox"/> yes <input type="checkbox"/> no
<i>*PAR does not recommend declawing. Cats must be provided adequate scratching surfaces.</i>

DOG Adopters only:

Will the dog live _____Inside _____Outside

Do you have a COMPLETELY fenced-in yard? _____yes _____no

If yes, type and height of fence:

If no, how will you contain the dog to your property?

Where will the dog be kept when no one is home?

How many hours per day will the dog be left alone?

Where will the dog sleep?

What will you do with the dog when you go out of town?

Are you willing to obtain a crate for house-training if necessary?

Are you willing to enroll the dog in obedience training classes?

How would you handle destructive behavior (chewing, barking, digging)?

PET EXPERIENCE**CURRENT PETS**

Name	Breed	Age	Vaccinations	Sex	Spay/Neutered	Illnesses	Behavior Issues

VETERINARIAN REFERENCE

Name:

Phone:

City:

PREVIOUS PETS

Name	Breed	Age	What happened to him/her?	Name and phone of Veterinarian who last saw this pet

Miscellaneous

Rescued animals need time to adjust to a new home. Are you willing to give this dog/cat adequate time to ensure a proper adjustment? yes no

For what reason, if any, would you consider giving up your pet?

Do you agree to have regular check-ups and vaccinations administered by a vet? yes no

Does your household budget allow you to provide regular veterinary care for this dog/cat (approximately \$300-\$400 per year)? This includes annual vaccines, feline leukemia test, heartworm test, flea preventative, and diagnosis and treatment of any illness. yes no

Would you object to a PAR representative visiting your home prior to or following a pet adoption?
 yes no

I/we acknowledge that all of the information provided on this adoption application is correct. I/we understand that any misrepresentation of facts may result in the removal of an adopted dog/cat from my home by Paradise Animal Rescue.

Primary Adopter Signature:

Secondary Adopter Signature:

Date:

Date: