## **Agreement to Transfer Pet Ownership**

Name	_ Employer	
Address	Address	
Phone	Phone	
I acknowledge that I am transferring ownersh practice:	ip of the pet described be	elow to this veterinary
Name	Color Weight Kitten Kitten Spayed Fema    t):  t to this veterinary practile either a) adopted to a new ime period, euthanized a ocal humane society for a laced as a pet and compa    l maintain strict confidence    Meight Kitten    Spayed Fema    A confidence    Color    Weight Kitten    Spayed Fema    A confidence    I maintain strict confidence    Meight Kitten    Spayed Fema    Spayed Fema    A confidence    Meight Kitten    Spayed Fema    Meight Kitten    Meight Ki	ce, where he/she will be w owner, b) if a new home the option of the adoption or euthanasia.
Once ownership has been transferred, condition or status of this pet.		
I am financially responsible for the fe transfer of ownership to this veterinar		edical care up until the
I agree to transfer the above-named animal as	ofTime	Date
Signature of Transferring Owner		Date
Signature of Telephone Witness (if no	eeded)	Date

## **Pet Adoption Agreement**

Name		Employer	
Address _		Address	
		Phone	
I acknowle	edge receiving a pet from this facility	identified as follows:	
Name		Age (as determined by veterinary practice)	
Breed		Color	
Microchip	/Tattoo ID Number	Weight	
Dog _	Cat Puppy	Kitten (check one)	
Male _	Female Neutered Male	Spayed Female (check one)	
Vaccinatio	on History	<del>-</del>	
Dewormin	ng History		
I agree (pl	ease initial each statement):		
	To provide proper and adequate food to treat him/her humanely at all time	d, water, housing, exercise, and grooming for this pet and es.	
	To provide veterinary care in the form of vaccinations, preventive heartworm medications as appropriate, and such veterinary medical care as is necessary to prevent and/or treat accidents and illnesses.		
	To obey local licensing and animal confinement laws.		
	Not to sell, give away, or abandon the animal if I no longer desire it but, instead, to return him/her to the above veterinary practice or to a local animal shelter.		
	Not to sell, give away, or use this animal for experimental purposes, allow him/her to engage in dog fighting, or pursue any guard dog or attack dog training with him/her.		
	That if it is determined that this pet has not been spayed or neutered, I will have him/her spayed or neutered before he/she reaches six months of age if he/she is not an adult, or within two months of adoption if he/she is an adult.		

	That my place of residence in a home, apartment, concomplex, or other housing complex allows for the ovadopting.	1
I acknow	vledge that (initial each statement):	
	I have been informed that all animals can carry and t people, including bacteria, viruses, parasites, and rin undetectable in what appears to be a healthy animal	gworm, and that these diseases may be
	I am aware that pets may exhibit normal but potentia not limited to, aggression, house soiling, biting, scrat barking, digging, mounting people's legs, marking w (cats), and that these normal behavior patterns may be facility has told me that this pet will <b>not</b> engage in an	ching (people, furniture, and woodwork), rith urine (dogs), and spraying urine e difficult to manage. No one at this
	The above veterinary practice is in no way responsib on another person, my property, or the property of ar to hold the above practice responsible.	•
	I am aware that, depending on size, species, and/or be and provide pet health insurance and/or veterinary ca \$1,500 per year. I am financially able to meet and w	re for a pet average between \$500 and
	I accept the animal as it is at the time of adoption and practice is not responsible for any medical conditions time of this adoption or discovered after such adoption	s not readily detected prior to or at the
	I have read this agreement and release the above pracassociated with my adoption of this animal.	ctice from any present or future liability
	Signature of Adopting Owner	Date