

DATE: \_\_\_\_\_

**PULASKI COUNTY HUMANE SOCIETY**

*P.O. Box 448, Somerset, KY 42502*

Phone: (606) 451-2367

E-mail: [info@bhumane.org](mailto:info@bhumane.org)

Website: [www.bhumane.org](http://www.bhumane.org)

**CANINE ADOPTION AGREEMENT**

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Approximate Age: \_\_\_\_\_ Markings: \_\_\_\_\_

Fostered with: \_\_\_\_\_

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Adopter's Name (please print): \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Are you at least 21 years of age? \_\_\_\_\_

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Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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Personal Reference: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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Veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_

For whom are you adopting? \_\_\_\_\_

Is everyone in the household in favor of adopting this pet? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Does anyone in your household have allergies to animals? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

How many people live in your household? \_\_\_\_\_ ADULTS: \_\_\_\_\_ CHILDREN: \_\_\_\_\_

Ages of children: \_\_\_\_\_

Do you live in a: HOUSE \_\_\_\_\_ APARTMENT \_\_\_\_\_ MOBILE HOME \_\_\_\_\_ CONDO \_\_\_\_\_

Do you: OWN \_\_\_\_\_ RENT \_\_\_\_\_ How long at this address? \_\_\_\_\_

If you rent, are you permitted to have this pet? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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Are you able to fulfill all the requirements for this pet, including any and all vet care over and above what the Humane Society has already provided? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Where will this pet spend the most time?

INSIDE \_\_\_\_\_ OUTSIDE \_\_\_\_\_ GARAGE \_\_\_\_\_ KENNEL \_\_\_\_\_

How many hours a day will your new pet be left alone? \_\_\_\_\_

Do you have a fenced yard? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

If **YES**, what kind of fence? \_\_\_\_\_ How high? \_\_\_\_\_

If **NO**, how will you exercise this pet and keep it safe from harm while it is outside? \_\_\_\_\_

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Do you have pets now? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_ Type/Breed \_\_\_\_\_

Age(s) \_\_\_\_\_ Sex \_\_\_\_\_ Spayed/Neutered **YES** \_\_\_\_\_ **NO** \_\_\_\_\_ Kept In/Out \_\_\_\_\_

Are your pets current on vaccinations? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Are your pets current on heartworm preventative? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Would you object to a follow-up visit by the Humane Society? **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

The Pulaski County Humane Society's adoption fee includes the following:

- ❖ Age-appropriate shots
- ❖ Testing for worms, and treatment if the test is positive
- ❖ Dogs tested for heartworm if at least 6 months of age
- ❖ Spayed/neutered at the appropriate age

As the adopter of a Pulaski County Humane Society animal, I hereby agree:

- To return the animal to the Pulaski County Humane Society if, for any reason, I cannot keep the animal I adopted;
- To contact the Humane Society when the pet reaches 6 months of age, and arrange for it to be spayed/neutered, if this has not already been done;
- To not sell, trade, loan or give away this adopted pet;
- Because of the costs involved in veterinary care, feeding and fostering of Humane Society animals, **I am not entitled to any refund** in the event that the adopted animal is returned to the Humane Society;
- To notify the Pulaski County Humane Society of my new address and phone number, in the event that I move;
- That the Humane Society may terminate this contract, without notice, and take immediate possession of the adopted animal, in the event that a representative of the Society determines that the adopter has violated this agreement, or that the animal is not being provided with suitable living conditions;
- To a post-adoption home visit by a member of the Society;
- To take my adopted pet to the veterinarian, at my own expense, for the required and recommended vaccinations.
- To keep the adopted pet on heartworm and flea prevention programs as recommended by my veterinarian;
- To provide the adopted pet appropriate food, fresh water, adequate shelter and humane treatment at all times;
- To provide safe living conditions for the adopted animal;
- To **never chain or tie** the adopted animal.

**I understand that it is impossible for the Humane Society to guarantee the breed, temperament or health of its animals, given their uncertain backgrounds. Therefore, upon adopting this animal, I assume full responsibility for its future care and veterinary costs.**

**I hold harmless the Pulaski County Humane Society and all its workers and volunteers for any damage, injury or other liability caused by the animal that I am adopting today.**

Adopter's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adopter's Printed Name: \_\_\_\_\_

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

***For Humane Society Use Only***

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ Evaluator: \_\_\_\_\_