



P.O. Box 11133 Prescott, AZ 86304 • 928.778.2924 • www.unitedanimalfriends.org

Adoption Agreement - Dog

Dog Information (UAF to complete)

Name _____ UAF ID # _____ Gender M F

Breed(s) _____ Color _____ Age _____

Adopter Information

Name _____

Address _____

Home phone _____ Cell phone _____

Email address _____

Adopter Agreement

United Animal Friends (UAF) may not know the dog's past background. UAF recommends a two-week quarantine period whenever a new pet is adopted into a home and that all current animals in the adopter's home are up to date on their vaccines.

AS THE ADOPTING PARTY, I AGREE WITH THE FOLLOWING:

1. I acknowledge that UAF cannot guarantee the health or temperament of the dog. I hereby release UAF from any claim, cause of action, or liability for any injury or damage to persons or property. If a health problem is discovered within the first two weeks of ownership, I will notify UAF to discuss the matter.
2. It is my commitment to provide a safe and caring environment. I agree not to have my dog chained or living outside.
3. I agree to keep an ID attached to a properly-fitted collar which will remain on the dog at all times and to obtain all licenses required by local authorities.
4. I agree to keep my dog up to date with his/her vaccinations and provide adequate veterinary care.
5. I agree to allow UAF to make follow-up visits and if, in the judgment of UAF, I do not comply with the above provisions, UAF has the right to take possession of the dog.
6. I agree to have a plan in place in for care of this dog in case I become unable to care for it.

Return Policy

I understand that if I cannot keep the dog I am adopting, I agree to return it to UAF. I will give UAF adequate notice to allow them to find a safe place for my dog. I will not give the dog to friends, relatives or a shelter/rescue group without prior written consent from UAF. I understand that if I return this dog, my adoption fee will not be refunded.

Acknowledgement and Agreement

I understand and agree to the above terms.

Adopters' Signature(s) _____ Date: _____

Adopters' Signature(s) _____ Date: _____

UAF Signature _____ Date: _____

Adoption Payment

Make check payable to United Animal Friends

Driver's License # _____ State Issued: _____

Adoption Fee: _____ Spay/Neuter Deposit: _____ Additional Donation: _____

Vaccination and Medical Information (For UAF use only)

Spay/Neuter Date: _____ By _____

4-in-1 (Distemper, Adenovirus 2, Para influenza, and Parvovirus) Date: _____ By: _____

Rabies Date: _____ By _____

Bordetella (Kennel Cough) Date: _____ By: _____

Known medical conditions: _____



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Adopter - Take this completed agreement to Petco for your FREE coupon book! Petco SKU# 2489073

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