

**BRIARCREST VETERINARY CLINIC ADOPTION APPLICATION**

THIS APPLICATION MUST BE FILLED OUT COMPLETELY.

Name \_\_\_\_\_ TDL# \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone# (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Which animal do you wish to adopt? \_\_\_\_\_

Why do you want a pet? \_\_\_\_\_

Do you have other animals? If so, how many? \_\_\_\_\_

What kind of animals are they? \_\_\_\_\_

Are your pets spayed/neutered? \_\_\_\_\_

Have you owned pets before? \_\_\_\_\_

What happened to them? \_\_\_\_\_

How many people are in your household? \_\_\_\_\_ How are they related  
to you? \_\_\_\_\_ If you have children, what are their ages? \_\_\_\_\_

Do you rent or own your home? \_\_\_\_\_ How long have you lived there? \_\_\_\_\_ Does your  
rental agreement allow you to have pets? \_\_\_\_\_

Landlord's name and phone# \_\_\_\_\_

What is the size of your lot? \_\_\_\_\_ Does your home have a fenced in yard? \_\_\_\_\_

Where will you keep your pet during the day? \_\_\_\_\_ night? \_\_\_\_\_

When you or your family is away overnight? \_\_\_\_\_

When you or your family is on vacation? \_\_\_\_\_

If you have children, what are their ages and sex? \_\_\_\_\_

Are any other family Their name(s), employer(s), work hours,

What is your occupation? \_\_\_\_\_ What is your employer's name, address, and phone#?

How long have you worked for this employer? \_\_\_\_\_ If less than

one year, where were you previously employed? \_\_\_\_\_

What are your work hours? \_\_\_\_\_ Are any other family

members employed? \_\_\_\_\_ Their name(s), employer(s), work hours,  
and occupation? \_\_\_\_\_

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**REFERENCES:**

Name, address, and phone# of the vet you use most often \_\_\_\_\_

Date of last visit \_\_\_\_\_ Reason for visit \_\_\_\_\_

Name, address, and phone# of a local individual (not related) who knows or has known your  
pets \_\_\_\_\_ Have you or anyone else in

your family ever been charged with abuse or neglect of an animal or a

child? \_\_\_\_\_ Charged with any other

crime? \_\_\_\_\_ If you have a pool, is it fenced in? \_\_\_\_\_

Have you asked yourself whether your lifestyle is so busy that you may not have time or energy to properly  
care for a pet? \_\_\_\_\_ May we visit your home and check your references to verify the

information you have provided? \_\_\_\_\_

- Kitten/Cat Adoption Fee \$60.00
- Puppy/Dog Adoption Fee Male \$80.00
- Puppy/Dog Adoption Fee Female \$90.00

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The information I have provided in this application is true and complete to the best of my knowledge. I understand that if any information is intentionally falsified, I will be denied adoption of an animal. I also understand that by filling out this application I am not promised an animal, but that I will be considered for adoption of an animal pending the review of this application. It may take several days to review this application.

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Signature of Applicant

Date

## BRIARCREST VETERINARY CLINIC ADOPTION CONTRACT

The adopting family represents that no member of the family *has* ever been charged with cruelty to animals and agrees to accept the following conditions and restrictions in order to be eligible to adopt the pet described above:

- 1) The pet will be housed strictly indoors and will receive all care and attention necessary to ensure the health and well being of the pet. This includes providing, at all times, sufficient food, water, exercise, and medical care including keeping current on vaccinations.
- 2) The pet will not be abused in any manner. The pet will not be allowed off the property unless accompanied by a mature individual. The pet will not be used in any type of animal fighting. The pet will never be the subject of, or subjected to any biological, chemical, psychological, or other experiment.
- 3) If the pet has not been altered at the time of adoption, the adopting family will have the pet spayed or neutered at the age of six months or within ten days from the date of this agreement, and will provide the Adoptor written verification of this surgery within ten days after it is performed. The pet will not be used for breeding purposes.
- 4) The adopting family recognizes that although the Adoptor has made every possible effort to provide a pet that is compatible with the adopting family, the Adoptor does not warrant the temperament or behavior of the pet, and is not held liable for any acts of the pet while living with the adopting family.
- 5) The adopting family will keep the pet for so long as it shall live and will not transfer the custody or ownership of the pet to any other person or to any business or organization other than Briarcrest Veterinary Clinic.
- 6) The adopting family must notify the Adoptor at least one week prior to any change of address/phone# of the adopting family.
- 7) The adopting family recognizes the need to ensure that the pet is receiving proper and humane care, and agrees to allow inspection of the home and conditions in which the pet is living at any time by the Adoptor. The adopting family agrees to surrender custody of the pet immediately upon demand by the Adoptor if the Adoptor determines that the terms and conditions of this agreement have not been met or if the Signature of adopting family pet will not receive the proper care in the future.
- 8) This pet is presumed to be in healthy condition. Briarcrest Veterinary Clinic will not be responsible for any clinical symptoms, which are not in evidence at the time of adoption.
- 9) The adoption donation is non-refundable.
- 10) Finally, the adopting family acknowledges that the purpose of this Agreement is to ensure the health and well being of the pet, to protect the pet against neglect and cruelty, and that the adopting family enters into this agreement freely and with good will.

Agreed to and accepted:

\_\_\_\_\_  
Signature of Adopting Family

\_\_\_\_\_  
Date