



Florence Dedman Animal Shelter and Foundation

1410 24TH Street, P.O. Box 1282, Fort Benton, MT 59442

(406) 622-5657 dedmanfoundation@gmail.com

Feline Adoption Contract

Name: _____ Date: _____

Physical Address: _____

Mailing Address: _____

Phone #: _____ Cell Phone #: _____

Do you live in a: House _____ Apartment _____ Mobile Home _____

Do you Own _____ Rent _____

If you rent what is your landlord's Name: _____ Phone: _____

Please provide the names and phone #s of 2 references we may contact

1. _____

2. _____

Please list any other animals in the household _____

Provide the name and phone # of your veterinarian _____

Have you ever surrendered an animal to the Florence Dedman Animal Shelter? _____

If you answered yes please explain: _____

Please initial the following statements after you have read and understood them.

____ Adopter understands this animal has not been tested or vaccinated for Feline Leukemia Virus (FeLV) or Feline Immunodeficiency Virus (FIV). If adopter would like this animal to be tested before proceeding with the adoption, they must do so at their own expense.

____ **(Kittens Only)** Adopter understands that kittens have only received age-appropriate vaccinations and it is up to the adopter to make a veterinary appointment to get appropriate booster vaccinations.

____ Adopter understands that going to a new home is stressful. Sometimes the animal can become scared or sick. It is up to the adopter to monitor to make sure he/she is acclimating well and if they do get sick will make a veterinary appointment to get started on appropriate medications.

____ Adopter understands the need to slowly transition their new pet to food of their choice. Mix food from the shelter with new food 75/25 for 3 days, 50/50 for 3 days, 25/75 for 3 days.

____ Adopter shall provide the animal with humane care and maintain it in accordance with all current and future state, county, and municipal laws and ordinances where the Adopter resides.

____ Adopter shall provide adequate food, fresh water, shelter and proper socialization.

____ Adopter shall provide the animal with necessary veterinary care upon sickness, disease or injury and shall take it to a veterinarian at least once a year for an annual health examination and routine vaccinations.

____ The animal shall not be sold, transferred, relinquished nor given to any research institution where medical experimentation or other experimental practices take place.

____ The animal shall reside at the Adopter's address.

____ The Adopter shall not abandon this animal because of a move.

____ The Adopter agrees to give the described animal a minimum of two (2) weeks to acclimate to you and your household.

____ The Adopter understands that the Florence Dedman Animal Shelter and its representatives have limited information regarding the health, temperament and/or habits of the animal. The Adopter agrees to accept the animal as described.

____ The Adopter, does hereby release, discharge and hold harmless the Florence Dedman Animal Shelter, and any other person, firm or corporation charged or chargeable with liability, their heirs, administrators, executors, successors, and

assigns from any and all claims, damages, costs, expenses, loss of services, actions and causes of action, whether known or unknown, belonging to the said Adopter arising out of any action or occurrence from the date of this contract arising out of or in connection with the adoption of the animal described below.

___The Florence Dedman Animal Shelter may make inquiries and/or examine the animal at any time, upon reasonable notice. If the rescue determines the Adopter is not providing adequate food, shelter, veterinary care or is otherwise in breach of any obligations herein, the rescue shall be entitled reclamation of the animal and make arrangements for the animals care and re-adoption.

___The Adopter agrees to pay any and all expenses, including court costs and reasonable attorney fees in enforcing the terms and provisions of this contract.

Adoption Fees are non-refundable and are as follows:

Cats: \$75.00

Kittens: \$50.00

Senior Cat: \$60.00

If the animal has not been sterilized prior to this adoption due to age or physical condition a \$50.00 deposit will be required. Once the Adopter provides proof of sterilization, the Adopter will be reimbursed their deposit. The deposit will be forfeited if spaying or neutering is not done within 30 days if the cat is more than 6 months old at the time of adoption OR by the time the animal is 6 months of age.

If adopter does not contact Dedman Animal Shelter when the spay/neuter is due, adopter understands their spay/neuter deposit will be forfeited

A current vaccination/medical record of the adopted animal will be provided to you. If the said animal is not old enough for a rabies vaccination a deposit of \$30 will be required and reimbursed with proof of vaccination.

I certify I am at least 18 years of age and the information provided is correct to the best of my knowledge. Providing false information will result in the reclamation of this animal. I am fully aware that I am adopting a living creature and the Florence Dedman Animal Shelter is unable to guarantee the health or behavior of any animal. I understand that I may return the animal to the Florence Dedman Animal Shelter if it has an illness diagnosed by a licensed veterinarian within 7 days of this adoption placement. ***I understand any sum paid to the Florence Dedman Animal Shelter is non-refundable except for the diagnosis of illness as stated above.***

THE UNDERSIGNED hereby acknowledges they have read the terms of this contract and does hereby agree to abide by each of the rules of adoption set forth above.

The Florence Dedman Animal Shelter reserves the right to refuse any adoption!

Signature of Adopter _____ Date _____

OFFICE USE ONLY

Animal Name: _____

Animal ID# _____

Breed: _____

Age: _____

Approved for adoption _____

Denied adoption (please explain) _____

Staff Signature: _____

Adoption amount: _____

Deposit amount: _____.

Check# _____

Cash: _____