

Last Chance Animal Sanctuary, Inc. (LCAS), a no-kill sanctuary

PO Box 21338, Bradenton, FL 34204

ADOPTION AGREEMENT

Contract between Last Chance Animal Sanctuary, Inc. (LCAS) and the adopter as indicated below.

Adopter agrees (initial):

_____ To provide all necessary and adequate care to described pet. Necessary and adequate care is defined, but not limited to, shelter, food, water, attention, socialization, and medical care from a licensed veterinarian.

_____ If adopter does not provide such care as determined by LCAS, LCAS has the full right to reclaim said pet and the adopter shall lose all rights to the pet.

_____ If adopter cannot continue care as described, adopter will notify LCAS to arrange rehoming.

_____ Waiver of all liability with respect to Last Chance Animal Sanctuary, Inc., its principles, its property owners where the Sanctuary is located, Board of Director members, and volunteers.

_____ An adoption fee of \$50.00 for cats (age 6 months and over) and \$85.00 for kittens (under 6 months), unless otherwise stated and agreed upon.

_____ To NOT declaw the pet

_____ That pet will be maintained as an indoor only pet

_____ Pet will not be euthanized unless terminally ill and/or suffering

Covenants:

LCAS does not guarantee the future health of the pet and will not be held liable for any unforeseen social, mental, behavioral, or health issues that may occur concerning the pet, other animals, or any individuals in or outside of the adopter's property.

Pet services include: testing for feline leukemia (FeLV) and feline immunodeficiency virus (FIV), age-appropriate vaccines, microchip, and altering (spay/neuter).

Adopter:

Name: _____

Address: _____

Contacts Cell: _____ Home: _____

Signature: _____ Date _____

LCAS:

Pet Name: _____

Description: _____ Microchip: _____

Representative: _____ Date: _____

Documents: () Medical Record () Microchip record

LAST CHANCE ANIMAL SANCTUARY INC. (LCAS)

P.O. BOX 21338 BRADENTON, FL. 34204

(941) 373-5670

ADOPTION APPLICATION

I, the adopter, understand that LCAS is not required to adopt an animal to me. It is decided by their guidelines whether or not they accept my application and provide me with the pet I choose. I will not hold LCAS, the owners, property owners, volunteers or board members liable for any injury or unforeseen problems that I may incur while on LCAS property or while on the property of LCAS affiliates.

Adopter's Signature _____ Cell: _____

Adopter's Name: _____ Home: _____

Adopter's Address: _____ Email: _____

_____ DL#: _____

Employment: _____ Work#: _____

Who is living in the home? _____

Do you rent or own? _____ Landlord's Name & Phone: _____

Pet Deposit Required? _____

Are your other animals altered and current on their vaccines? _____

Who is your Veterinarian? _____ Phone#: _____

Do you plan on de-clawing your new cat/kitten? _____ Is your new pet going to be inside, outside or both? _____

Have you ever taken a pet to a Shelter? If yes, please explain?

If you are over the age of 65 have you made arrangements for your new pet in case of illness or death?

LCAS Representative: _____ Pet they are interested in: _____

Date: _____

Microchip#: _____

(v. 9/2016)