



Small Animal Adoption Agreement

Adopter Information:

Name: _____ Partner's Name _____
Address: _____ Apt # _____
City: _____
Province: _____ Postal Code: _____
Email: _____
Phone: _____ Alternate Phone: _____

I hereby acknowledge receiving from the **Stratford Perth Humane Society** a:

Rabbit; Guinea Pig; Pocket Pet; Bird; Other (circle appropriate)

Office Use Only:

ID Number: _____
Age: _____ (as estimated by Stratford Perth Humane Society)
Breed: _____ Gender: _____ Colour: _____

I Agree: (Please initial each statement if you have read and understood the following)

- _____ 1. To provide proper and adequate food, water, housing, exercise, grooming and humane treatment at all times.
- _____ 2. To provide all required vaccinations and all necessary medical care as directed by a veterinarian.
- _____ 3. To obey local animal by-laws.
- _____ 4. Not to sell, give away or use this animal for experimental purposes.

I Acknowledge that: (Please initial each statement if you have read and understood the following)

- _____ 1. I am aware that an RVT or veterinarian has examined this animal, that it has received a full physical assessment and that any found medical concerns have been treated.
- _____ 2. I have been informed that all animals can from time to time carry and transmit diseases, some of which affect people, including bacteria, viruses, parasites, and fungal diseases (i.e. ringworm) and that these diseases may be undetectable in what appears to be a healthy animal at the time of adoption.
- _____ 3. I am aware that pets may exhibit normal but potentially undesirable behaviours including, but not limited to, aggression, biting, scratching (people, furniture and woodwork), chewing, digging, urine marking and that these normal behaviour patterns may be difficult to manage. No one at the **Stratford Perth Humane Society** has told me this pet will **not** engage in any of these behaviour patterns.
- _____ 4. I have been informed that I should make an appointment with my veterinarian for a post adoption exam within 48 hours of adoption and that it is recommended to keep my adopted pet away from my current animal (s) until they have been examined by my veterinarian.
- _____ 5. I understand that if my pet is diagnosed with an illness by a qualified veterinarian **within the first 48 hours following it's adoption** and I am not prepared to take responsibility for the cost of medical care, I may return the animal to the **Stratford Perth Humane Society**. If I have authorized medical treatment within the first 48 hours, **I am fully responsible for all costs**. If I wish to adopt another animal, I may discuss this with Management. If I do not wish to adopt another animal at time of return, a gift certificate can be issued for a future adoption. I understand that a refund, minus an administrative fee (dependent upon adoption fee), may be available.

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Continued from front:

I Acknowledge that: (Please initial each statement if you have read and understood the following:)

_____ 6. I understand that due to high veterinary costs, the **Stratford Perth Humane Society** does not do routine bloodwork, urine or fecal testing on their animals, and that these tests are only completed if symptoms warrant further investigation.

_____ 5. I also understand that should my pet **not get along with any pet in my home** that I may return the animal to the SPHS and will **not receive a refund**. Should I wish to adopt another pet I can do so for the regular fee. I understand that the Humane Society cannot guarantee/predict or control the behaviour of my adopted pet or that of my current pet(s) in my home.

_____ 5. I am aware of the average costs to feed, train and provide veterinary care for a pet and I understand the financial obligations of owning this animal

_____ 6. The **Stratford Perth Humane Society** is not responsible for any damage which the animal may inflict on another person, my property or the property of another and no attempt will be made by me to hold the **Stratford Perth Humane Society** responsible for any damage.

_____ 7. I understand that any animal deemed good with children means that to the knowledge of the **Stratford Perth Humane Society** the animal has not shown aggressive behaviour and is likely to be compatible with children. I agree this is not a guarantee of a child's safety with this animal and that an adult should always supervise interactions between animals and children.

_____ 8. All people, including adults and children, who will be living with this animal consent to the adoption and at least one head of household has met this animal. **If this animal is returned due to allergies, there will be no refund.**

_____ 9. I accept that the animal as it is at the time of adoption and understand that the **Stratford Perth Humane Society** is not responsible for any medical or behavioural conditions not readily detected or detectable prior to or at the time of this adoption or discovered after such adoption. At no time will the **Stratford Perth Humane Society** accept responsibility for expenses incurred following adoption for veterinary care or the services of an animal behaviourist. This includes veterinary expenses for animals currently residing in the home.

_____ 10. I acknowledge that I have read and understand this agreement and hereby release the **Stratford Perth Humane Society** from any present or future liability associated with my adoption of this animal.

I agree to adopt the above mentioned animal as of _____ (date).

Contact me concerning upcoming Events and Fundraisers (please check) **Y** **N**

I would like to receive a copy of your quarterly Newsletter (please check) **Y** **N**

**I agree to receive newsletters and other commercial electronic messages from Royal Canin Canada Company. By agreeing to receive Royal Canin communications – I am helping to feed the dogs and cats in the care of the Kitchener Waterloo HS / Stratford Perth HS. I may withdraw my consent at any time using the unsubscribe mechanism provided to me in communications from Royal Canin. I may also contact Royal Canin at: Royal Canin Canada, 100 Beiber Rd, Puslinch ON, N0B 2J0 Tel. 1. 800.527. 2673
E-mail: consumeraffairscanada@royalcanin.ca (Please check one) **Y** **N****

Signature of Adopter

Date

Signature of SPHS Staff/Volunteer

Date

The Stratford Perth Humane Society at no time will see, lend or give your personal information to any group or person. This includes List Brokers, Mail Order Businesses, Telemarketers or other companies would sell their services or products. All information is stored in a secure manner in accordance with the Personal Information Protection and Electronic Documents Act.