

Woodstock Animal Foundation, Inc.
For the Care of Animals

DOG
ADOPTION
AGREEMENT

Pet's Name _____
Date and Time of Application _____
Name of person on shift when application taken _____

Originated at: _____ Foster Care with: _____
Address _____ Address _____
Phone # _____ Phone # _____

Breed Type _____
Color _____
DOB _____
Medical Records Y N
Pictures attached Y N

Woodstock Animal Foundation is a 501 C 3 organization not funded by any county or state funding. Filling out an application does not guarantee that the animal you are choosing to adopt will be approved as we make our adoption decisions based on matching the needs of the pet with the adopters ability to match those needs. The order in which the application is taken does not also guarantee adoption, though we do review them as they are submitted. The most important decision in who adopts our much loved rescued pet is in making the match so great that there is little to no chance the pet will never have to be "re-homed" again.

Woodstock reserves the right to determine the most appropriate home for the pet. If denied, please do not take it personally but think about the pet and our mission for the pets we rescue. There may be another pet in our program not yet at the adoption site that may be more suited for you and that you may be happier with. Thank you for your understanding of our program and its mission. As always, we continue to work hard every day to make sure every pet is a wanted pet and try to stop so many from dying on death row in shelters across the state.

Woodstock Animal Foundation Adoption Agreement

Date _____

The animals available for adoption come to us in a variety of ways. Many were abandoned, stray, abused or were no longer able to stay with their current human companion due to extenuating circumstances. All animals are examined and their health monitored while they are in foster care homes. However, due to stressful situations under which many of these animals come to us, there is always the chance that an animal is incubating a disease without showing clinical signs. **We require a visit to your veterinarian within three business days of the adoption date.** WAF believes these animals to be in good health, but does not guarantee the health of any animal or assume any financial responsibility for future veterinary costs.

_____ (please initial)

In order to adopt a Woodstock Rescued Animal you must:

Be 21 years of age

Have a valid driver's license

Provide a form of identification showing your present address

Provide your veterinarian's name and phone number (we will do a vet reference check)

If you rent, you must provide landlord's name, phone number, and lease expiration date. (We will call to verify all information.) If less than 6 months, past address and landlord information is required.

Provide daily care, daily training (including crate training for dogs/puppies), kind treatment, and vet care as needed (including all vaccines). Dogs are to be on a heart worm preventative program and flea control program as directed by a veterinarian.

Be able to meet all requirements so that this pet can live a happy, healthy life for the rest of his or her life with you.

Agree to a home visit prior to adoption as well as a follow up visit in the future.

Remember these animals are here for various reasons. We know how fortunate they are to have crossed our paths or the paths of those who brought them to us. We want to ensure that health care, safety and loving care are provided to them for the rest of their lives.

Anyone who misleads or fails to provide accurate information on this application will be denied all adoption rights.

Thank you for your compassion and understanding the importance of our adoption process.

X _____
Applicant

X _____
Woodstock Representative

Driver's License Number _____
 Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Home Phone _____ Work Phone _____
 Cell Phone _____ E-Mail _____
 Employer _____ Address _____
 Occupation _____ How long at this company _____
 Work/School Schedule _____
 Who are you adopting for? _____
 Do you live in a:
 House ___ Apartment ___ Condo ___ Duplex ___ Townhouse ___ Trailer ___ Farm ___
 Do you Own ___ Rent ___ How long have you been at this address _____
 If you rent when is your lease expiring? _____ Landlord's phone number _____
 How many people live in your household? ___ adults ___ Children ___ (Children's ages _____)
 Is everyone in the household in favor of adopting a pet? Yes ___ No ___
 Where will this pet reside? _____
 Can you fulfill all requirements needed for this pet(s)? Yes ___ No ___
 Please explain your reason for choosing this particular pet? _____

 Does any member of your family/household have any known allergies to animals?
 Yes ___ No ___
 Do you have any pets now? Yes ___ No ___
 Type/Breed _____ Age _____ Sex _____ Spayed/Neutered _____ Kept where(in/out) _____

 If you have had pets in the past but no longer have them, briefly share with us how long you had them and what happened: _____

 Are all of your pets current on all vaccinations? Yes ___ No ___ Are you providing preventative treatment(s) such as heart worm preventative and flea control? Yes ___ No ___
 Who is your veterinarian _____ Phone _____
 How much do you plan to spend yearly to feed, vaccinate, license and provide medical care for your pet? _____
 If your animal becomes ill/injured do you have the means to cover medical costs? Yes ___ No ___
 Why do you want to adopt a puppy or dog _____
 What behavior do you expect from a puppy _____
 From an adult dog _____
 Where will your pet spend the most time? Outside ___ Garage ___ Kennel ___
 inside/outside equally ___ Confined to an area in your home ___
 Do you have a **fully secured** FENCED YARD? ___ WHAT TYPE OF FENCE? ___ HEIGHT ___
 How will you exercise this pet? _____
 While outside, how will you keep him/her safe from harm? _____
 If you choose a puppy, do you plan to crate train? Yes ___ No ___ Do you need information on crate training? ___ Have you ever lost a puppy to parvovirus? ___ When (date) _____
 Will you take your pet to training classes? Yes ___ No ___ If not, how will you train your pet? _____

 How much time will you allow for your new animal to adjust its new home environment and to your present pet(s) and lifestyle? _____
 What would constitute a reason for giving up your pet? _____
 Would you object to a home visit prior to the adoption? ___ Would you object to a follow up home visit? ___ This Application has been completed by _____ Date: _____

 This application has been reviewed by _____ Date: _____
 Approved by _____ Denied _____ Reason _____

WOODSTOCK ANIMAL FOUNDATION ADOPTION CONTRACT

I understand that this pet has been spayed or neutered. If it has not I will bring him/her to WAF clinic within one week to do so. This procedure is included in my donation fee.

I understand that due to the cost involved in veterinary care, feeding, fostering and training of the WAF animals, there is **no refund** for pets that get returned. (Please, if you think for any reason that you cannot commit unconditionally to this pet for the rest of its life, do not proceed with the adoption process.) _____
initial

If for any reason I cannot keep the pet I adopt, I agree and promise to return him/her to the Woodstock Animal Foundation Rescue and Adoption Program. I understand I have to arrange a date and time with the Adoption Coordinator **AND** that it may take 14-28 days to get the adopted pet back into the program. _____
initial

Whenever I move, I will notify Woodstock of my new address and phone number so they can update their files and follow up as needed.

I agree to take my newly adopted pet to a veterinarian within **3 business days** of adoption for a health check. I promise to take my pet to a veterinarian for the required and recommended annual vaccinations, including boosters for puppies and kittens. I promise to keep my adopted puppy/dog on heart worm preventative and flea control as recommended by my veterinarian. **If my pet becomes ill or injured, I promise to get immediate veterinary care and I am prepared financially to take on this responsibility.** _____
initial

I promise to provide my adopted pet with proper food, fresh clean water, adequate shelter and kind treatment at all times.

I promise not to sell, trade, loan or give away this adopted pet and will never allow him/her to be used for experimental purposes.

I agree that the pet's welfare is the most important factor, and if any representative of the Woodstock Animal Foundation finds unsuitable living conditions, or any violations of this agreement or contract, **WAF reserves the right to terminate the contract WITHOUT NOTICE and take immediate possession of the pet.** I understand and will pay reasonable attorney's fee in the event that an attorney is consulted or suit is brought for the return of the adopted pet.

I agree to a home visit prior to the adoption and after the adoption if desired by WAF. I am at least 21 years of age.

I understand that the WAF organization is supported mainly by volunteer efforts, therefore the adoption procedure may take time. Home visits will be arranged within 2-5 days of the date below.

Date: _____

Signature _____ Print Name _____

Address _____ City _____ State ____ Zip _____

Phone: Home _____ Work _____ Cell _____ Friends' number _____

E-mail address: _____ Parents' number: _____

Pet's Name _____

Dog __ Cat __ Male __ Female __ Age _____ Breed _____

Medical Records _____

Requirements for adoption _____

Amount paid _____ Cash __ Check __ Check Number _____ Date initials WAF rep __ _____

Approved by _____ Date Home visit scheduled for _____

Woodstock reserves the right to refuse an adoption to any one. No animal will be adopted to persons with a history of neglectful treatment.