

# TARPS

## Adoption Application

Animal ID # \_\_\_\_\_ Name \_\_\_\_\_ Description \_\_\_\_\_

### **A. Applicant Information** (Your answers to these questions help us find the best match between you and the animals in our care.)

Name \_\_\_\_\_ Phone(H) \_\_\_\_\_ (W) \_\_\_\_\_

Street Address \_\_\_\_\_ Mailing \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Own or Rent \_\_\_\_\_ *If renting, we need written "OK" from landlord*

Time lived here? \_\_\_\_\_ Number of people in your household? \_\_\_\_\_

**# of Children**      **Age of Children**      **Who live with or frequently visit with dog/cat**

\_\_\_\_\_

Do you now have pets? \_\_\_\_\_ if yes, state animal, age, sex, breed, spayed/neutered

\_\_\_\_\_

Have you had pets in the past? \_\_\_\_\_ if yes, state animal, how long you had, why you no longer have

\_\_\_\_\_

Veterinarian: \_\_\_\_\_

Give three references; state name, phone, address:

### **B. Pet Placement Policy**

Our purpose is to place a healthy animal in a responsible home, where it will receive affection, understanding, water, food, indoor housing, and veterinary care when needed. The animal will become part of the family, and will not become a free-roaming animal or add to the surplus of animals already in the community.

Animals will be placed with adults of legal age as household pets where they will be kept as family members. Animals will not be placed, trained, or used as "Attack or Guard" dogs. Animals will not be kept as outside dogs or cats.

No animals are to be "adopted" for someone else. No animals are to be adopted as "gifts".

No animal will be released unless it is guaranteed ample opportunity for adequate exercise under control (on a leash or in a fenced-in area) or under supervision. A dog, while chained, does not get adequate exercise.

Failure to abide by the TARPS Pet Placement Policy can result in the return of the animal to TARPS.

### **C. Terms**

1. I will have any adult dog licensed within 30 days. I will have any puppy vaccinated for rabies after 12 weeks of age and licensed when 6 months old. I will have any kitten vaccinated for rabies after 12 weeks of age. I will give the animals preventative health care as recommended by my veterinarian.
2. Any kitten or puppy or other animal that has been adopted by me and is too young to be spayed or neutered at adoption time, will be spayed or neutered by TARPS veterinarian upon reaching the age of 6 months for female kittens or puppies and 6-7 months for male kittens or puppies. Other species of animals will be spayed or neutered at an age that is determined to be safe by TARPS' veterinarian.
3. This animal will be examined by a veterinarian within seven days of the adoption. If for any medical reason the examination discloses that the health of the animal is questionable, the animal must be returned to TARPS, upon which my donation will be returned.
4. I will comply with all state and local ordinances regarding animal laws.
5. I agree to care for this animal humanely, which includes, but is not limited to, water, food, shelter, exercise, affection, and all necessary vet care.
6. If I do not want to retain custody of this animal, I agree I will not sell, give away, dispose of, or trade this animal in any way, but will return the animal to TARPS.
7. I agree TARPS may make inquiry or examine this animal at any time, and if it's condition or the condition in which it is living is not satisfactory, the animal will be reclaimed by TARPS immediately. I will notify TARPS within 24 hours of the loss or death of the animal, or the change of address.
8. Failure to comply with any contract terms may result in the return of this animal. I agree to reimburse TARPS for any legal costs incurred in the event that I violate this contract and I am required to return this animal.
9. I have read and agree to the Pet Placement Policy of TARPS and realize that failure to comply with the Pet Placement Policy could lead to the return of the animal(s) to TARPS.

### **D. Disclosure & Release Clause**

I, \_\_\_\_\_, by signing, do state that I am aware:

1. That animals have different responses to human actions, than humans may have.
2. The actions of animals are often unpredictable
3. Animals should be closely supervised at all times when they are with children.
4. Animal behavior may change after it leaves TARPS and resides in a different home environment.
5. TARPS makes no claims or representations as to the temperament of this particular animal, nor will I hold TARPS liable for the behavior of this animal after adoption. I agree to take full responsibility for any costs or damages incurred while this animal is in my care.

\*I understand any sum given to TARPS is a donation. \$ \_\_\_\_\_ received.

\*I agree to all terms set forth in this contract. TARPS may reclaim the animal from me if I do not fulfill this agreement.

Signature \_\_\_\_\_ Date \_\_\_\_\_

TARPS Representative \_\_\_\_\_ Date \_\_\_\_\_

**For our veterinarian needs, the TARPS Organization utilizes the services of Vincent C. Di Bernardo, Rockingham Veterinary Clinic, 197 Lower Bartonsville Road, Chester, Vermont 05143, Tel:(802) 875-3985, Fax: (802) 875-3989**