

Animal

## SAVING PRECIOUS LIVES, ONE DOG AT A TIME.

# **ADOPTION APPLICATION**

Please complete this application and return it to Cape Fear Rescue League (CFRL). Our Foster/Adoption Coordinator will be in contact with you as soon as possible with more detailed information. Please answer as honestly as possible. **None of the questions are meant to disqualify you from becoming a foster. Our goal is to make the best match between families and animals.** 

| Name:                | Age: years                |
|----------------------|---------------------------|
| Sex: M F             | Breed:                    |
| Color:               | Cash: Check #:            |
| DL #:                | State:                    |
| Fostered by:         | Foster phone number:      |
|                      |                           |
| Adopter Contact Info |                           |
| Full name:           |                           |
| Physical Address:    |                           |
| City, State:         | Zip:                      |
| Home phone:          | How long at this address? |
| Cell phone:          | Email:                    |
| Place of Work:       |                           |
| Work Address:        |                           |
| City, State:         | Zip:                      |
| Work phone:          | Ext:                      |
| Nearest Neighbor:    | Phone:                    |
| Vet:                 | Phone:                    |

|      | Applicant Ho                                                                      | usehold                                   |                   |            |                                                           |                                                                             |             |          |  |
|------|-----------------------------------------------------------------------------------|-------------------------------------------|-------------------|------------|-----------------------------------------------------------|-----------------------------------------------------------------------------|-------------|----------|--|
|      | # of adults in home:                                                              |                                           |                   |            | Chile                                                     | Children and ages:                                                          |             |          |  |
|      | You: ☐Rent ☐Own home ☐Live with parents                                           |                                           |                   |            | Fence                                                     | Fenced in yard? ☐Yes ☐No                                                    |             |          |  |
|      | Who will take care of this pet in your absence?                                   |                                           |                   |            | How many hours a day will this pet be left alone per day? |                                                                             |             |          |  |
| List | ist current and/or previous pets below:                                           |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | Breed                                                                             | Sex                                       | Age               | Alter      | ed?                                                       | How long with you?                                                          | Still have? | Why not? |  |
|      |                                                                                   |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      |                                                                                   |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      |                                                                                   |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | Questionnaire                                                                     |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | Why do you want to adopt?                                                         |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | If you move, what will you do with this pet?                                      |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | What will you do if this pet does not get along with your other animals?          |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | What do you estimate the cost will be per month to care for this animal?          |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | Have you ever taken an animal to the Shelter before? If yes, explain your answer. |                                           |                   |            |                                                           |                                                                             |             |          |  |
|      | Do you understand that a pet is a lifelong commitment?                            |                                           |                   |            |                                                           |                                                                             |             |          |  |
| This | particular anin                                                                   | nal has been ev Fenced in ya No other pel | ard<br>ts in home | as the fol | □No<br>⊠To I                                              | special needs:<br>children in hom<br>live and sleep il<br>dications (List): |             |          |  |

#### **ADOPTION AGREEMENT**

This Agreement is entered into this date by and between Cape Fear Rescue League ("CFRL") and the applicant ("Adopter") for the permanent adoption of the above described rescue dog ("dog").

#### Terms and Conditions:

- Adopter agrees to pay an adoption fee of \$\_\_\_\_\_\_ for the above named dog. This amount is refundable provided the adopter physically returns the dog to CFRL within ten (10) days of this Agreement and releases CFRL of any further liability.
- 2. Adopter agrees to have open communication with CFRL, to return phone calls and to honestly answer our questions when we call to check on the animal's well-being Additionally, CFRL reserves the right to conduct a home visit within thirty (30) days of the date of this Agreement.
- 3. Adopter agrees that if for any reason you can no longer provide a home for this dog you will physically return it to CFRL and will not for any reason at any time take the dog to an Animal Shelter or to Animal Control. Adopter agrees not to give away, sell or dispose of the dog without express consent of CFRL.
- 4. Adopter agrees the dog is to be a family companion and agrees to provide the dog with a safe home, adequate food, water, proper care, exercise, love and attention. Adopter agrees not to violate any laws or ordinances with the dog. The dog is not to be used as an attack or protection trained dog and will not be used for commercial security work.
- 5. Adopter has fourteen (14) days in which to provide CFRL with proof that the dog has had a health check by the veterinarian of your choice. Additionally, Adopter agrees to have the dog examined annually by a licensed veterinarian and to provide vaccinations, monthly heartworm preventative, rabies shots (according to the law) and any additional medical care deemed necessary.
- 6. CFRL reserves the right, in its discretion, for any reason, to retain physical possession of the dog at any time.
- 7. CFRL makes no claims or guarantees in regard to this animal's age, breed, health or temperament and is NOT liable for any future injury or damage that caused by this animal. Adopter accepts this animal as is with all defects, either observable or unobservable, and assumes all risk for the dog upon signing of this Adoption Contract.
- 8. Adopter certifies that information provided in this Agreement is true and complete. You understand that falsifying information in this Agreement or at any other time during this process disqualifies you from Adoption.

### Release of Liability:

Applicant's Signature:

I have read and fully understand the Adoption Agreement. I understand that the adoption of this dog from CFRL is at my own risk and agree to indemnify and hold CFRL, CFRL's volunteers and any other CFRL representative(s) harmless for any illness that the dog may develop and/or any injury or damage this dog may cause once I have taken possession of the dog.

| D i d l N                       |
|---------------------------------|
| Printed Name:                   |
| Date:                           |
| Co-Applicant's Signature:       |
| Printed Name:                   |
| Date:                           |
| CFRL Representative's Signature |
| Printed Name:                   |
| Date:                           |