CAT/KITTEN ADOPTION CONTRACT

The Southside SPCA and its representatives have the right to refuse any adoption.

Please print all inform	nation:			
Date:	Email address:			
VVork #	Home of	or Cell #		
Name(s):			n-vertex vertex expenses provide a grant control of the control of	y)
Address:	and the second s			
City/Town:				
Name of Veterinarian:	nto appear			*
PLEASE READ	All animals are sto			TIONS.
	For Sh	elter Use Only		
Log Number:				
Type of Animal:	Cat Kitten	Sex:	MaleFemale	
Description:		Name:		Militarios
DOB:	Rabies Vaccin	e? (date/location)	

P.O. Box 66, Meherrin, VA 23954 ~ www.southsidespca.org ~ (434) 736-9595 We're on Facebook: Friends of Southside SPCA

My initials next to each requirement below will serve to show that I acknowledge each statement, and I agree to the terms of this adoption.				
I understand that I am not PURCHASING a cat/kitten but ADOPTING an orphaned pet and therefore there is NO refund for ANY reason other than the pet being terminally ill (and this is confirmed by one of our vets). The Southside SPCA cannot guarantee temperament, behavior or health of the cats/kittens.				
I affirm that no member of my household, including me, has been convicted of an animal welfare law violation such as cruelty, neglect, or abandonment.				
I am adopting this animal for MYSELF and MY FAMILY (not as a gift for anyone outside the home address). I agree to care for it and protect it from abuse, neglect, or abandonment. This animal will not be used in any way for medical or experimental purposes.				
I agree to keep my cat/kitten indoors at all times.				
I acknowledge that the entire family is in agreement with this adoption, that I am 21 years of age or older, that I own my own home or have permission from my landlord to own a pet. I further acknowledge that there are NO PET ALLERGIES (that cannot be controlled with medication) in the home where the pet will reside. I also understand that I will not receive a refund if I am or if my family develops or has existing allergies to the pet.				
I understand that though this pet may appear healthy at this time, it may in fact be in the 1st stages of upper respiratory infection, skin problems, ear/eye infection or have a variety of other medical problems - some of which may be contagious to other pets. It is recommended that I keep other pets away from the newly adopted pet until a complete check-up has been done and the Southside SPCA advises that I obtain a physical for my newly adopted pet within 14 days of my adoption. All fees incurred will be at my own cost.				
I agree that after the adoption, representatives of the Southside SPCA may visit any time to check on the welfare of this animal; and if the representative finds that one or more of the provisions of this agreement have been violated, the Southside SPCA may reclaim the animal.				
I will notify the Southside SPCA if the animal is lost.				
IF FOR ANY REASON IT BECOMES NECESSARY FOR ME TO RELINQUISH CUSTODY OF THIS ANIMAL, I WILL CONTACT THE SOUTHSIDE SPCA. It cannot be given away, sold, or disposed of in any manner unless prior approval is granted by the Southside SPCA. I understand that the Southside SPCA can only take returns when space is available and a surrender fee may apply.				
How did you hear about us?				
shopping in the storeFriendInternetOther - Explain:				
Date:Signature:				
Adoption Fee: Southside SPCA Representative:				

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