

Amount paid: \$ \_\_\_\_\_ cash: \_\_\_\_\_ check# \_\_\_\_\_ driver's license \_\_\_\_\_ credit card \_\_\_\_\_  
Fostered by: \_\_\_\_\_ (circle one) kitten/ adult cat/ puppy/ adult dog  
Animal's name: \_\_\_\_\_ description: \_\_\_\_\_



Adopter's name: \_\_\_\_\_ Home phone number ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ city: \_\_\_\_\_ zip code \_\_\_\_\_  
work phone # \_\_\_\_\_ email address: \_\_\_\_\_

1. How long at this address? \_\_\_\_\_ Do you own, rent, or have roommates? (Please circle).
2. If you rent, does your landlord allow pets? \_\_\_\_\_ If you move, what will you do with your pet? \_\_\_\_\_

3. Your age: \_\_\_\_\_ Employer: \_\_\_\_\_ How long at present job? \_\_\_\_\_
4. Adults in household: \_\_\_\_\_ Number of children in households and ages: \_\_\_\_\_
5. Who will be responsible for the care of the animal? \_\_\_\_\_
6. Is any member of your family allergic to animals? \_\_\_\_\_ What if you later find out they are? \_\_\_\_\_
7. Has any of your animals ever been hit by a car? \_\_\_\_\_ Have you ever taken any of your animals to a shelter? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_
8. Who is your veterinarian? \_\_\_\_\_ Location \_\_\_\_\_ How long using? \_\_\_\_\_  
May we contact your vet? \_\_\_\_\_

**For Cats only:**

9. Do you plan to declaw this cat? \_\_\_\_\_ If yes, why? \_\_\_\_\_
10. Please check one. My cat will live: strictly outside \_\_\_\_\_ inside only: \_\_\_\_\_ inside/outside \_\_\_\_\_
11. If you should become pregnant what will you do with this cat? \_\_\_\_\_

**For Dogs only:**

12. Please check one. My dog will live: inside only \_\_\_\_\_ outside only \_\_\_\_\_ inside/ outside \_\_\_\_\_
  13. Do you have a fenced yard? \_\_\_\_\_ Will it live in a pen/doghouse? \_\_\_\_\_
  14. What is your view on heartworm preventative? \_\_\_\_\_
  15. Do you have other pets in your household? \_\_\_\_\_ Please list below.
- Dog or cat    Age    spay/neutered    How long has it been yours?    Does it live in or out?**

16. How do you plan to introduce this animal to your animals? \_\_\_\_\_
17. What would you do if this animal does not get along with yours? \_\_\_\_\_
18. During your absence, who will take care of this animal? \_\_\_\_\_
19. Why are you adopting an animal? \_\_\_\_\_
20. Do you understand that adopting an animal is a lifetime (15-20 year) commitment? \_\_\_\_\_
21. Do you understand that if for any reason you can no longer provide a good home for this animal that you must return it to Adopt-An-ANGEL? \_\_\_\_\_

If you live in New Hanover County, you are responsible for paying an annual \$10.00 pet licensing fee. Under the law, your pet must be vaccinated for rabies and you are required to pay this license fee or be fined. Do you understand? \_\_\_\_\_

Please sign below stating that the above information is true and that you agree to return the animal if it does not work out. Adopt-An-ANGEL makes no claims or guarantees about this animal's health or temperament and is not liable for any future damage or injury that may be caused by this pet.

\_\_\_\_\_  
Adopter's signature                      date

\_\_\_\_\_  
Witness (ANGEL representative)                      date



**ANIMAL ADOPTION AGREEMENT**

I, \_\_\_\_\_, hereafter referred to as the adopter, hereby agree that the animal I am adopting  
Description below:

Is being adopted by me solely as a pet for myself and/ or my immediate family. I agree that I will not sell, give away or otherwise dispose of this animal to any person(s), dealer, retailer, auction, institute or any other entity or abandon the animal for any reason. If I am unable or unwilling to keep this pet, I agree to contact Adopt-An-A.N.G.E.L. for them to reclaim this animal at no charge.

I hereby agree to care for the above-described pet in a humane and responsible manner and to provide it with food, water, shelter and veterinary care. I further agree that the above pet shall reside inside my home and not be allowed to roam freely.

I understand and agree that Adopt-An-A.N.G.E.L. makes no representations or warranties, expressed or implied, about the above mentioned animal's health or temperament and is hereby absolved from any liability for future damages or injuries caused by this animal.

If my newly adopted pet should get ill or develop any behavioral problems within two weeks of this adoption I will call Adopt-An-A.N.G.E.L. for any advice or suggestions that may help resolve the problem.

I certify that all statements made by me on this agreement and on my adoption application are true and correct. I agree that Adopt-An-A.N.G.E.L. has the right to confiscate the above-decried animal in the event that any statements made by me are found to be false and/or my check for the adoption fee is returned for insufficient funds.

I understand that my \$ \_\_\_\_\_ donation to Adopt-An-A.N.G.E.L. for adoption goes back into the organization to help cover the medical costs and rescue another animal needing this organization's help.

ADOPTER'S  
SIGNATURE \_\_\_\_\_  
DATE \_\_\_\_\_

ADOPT-AN-ANGEL WITNESS'  
SIGNATURE \_\_\_\_\_  
DATE \_\_\_\_\_