

## Adoption Contract

Cat 1	-----	Cat 2	-----
Microchip #		Microchip #	
Name		Name	
Cat Description		Cat Description	

### Contract Agreements:

- I agree that the animal above is being adopted for myself and will not be sold, adopted, or given to another party. **X**\_\_\_\_\_ (initial)
- I agree that I will not declaw the cat or allow the cat outdoors. **X**\_\_\_\_\_ (initial)
- I agree to care for the animal above in a humane manner and be a responsible animal guardian. This includes supplying adequate food, water, shelter, attention, and medical care. **X**\_\_\_\_\_ (initial)
- I agree that if at any point I cannot keep the animal, I will return him/her to PURRS Naperville. **X**\_\_\_\_\_ (initial)
- I understand and agree that the current rescue makes no guarantees about the animal's temperament, age or future medical status and is not responsible for future medical bills, damages or injuries caused by the animal. **X**\_\_\_\_\_ (initial)
- I give the current rescue permission to call me or email me for adoption follow up. **X**\_\_\_\_\_ (initial)
- I agree to keep the rescue informed of my current home address and phone number. **X**\_\_\_\_\_ (initial)
- I understand that I am making a commitment for the term of this animal's life which may be up to 20 years. **X**\_\_\_\_\_ (initial)
- I acknowledge I have received the handout titled "Medical Care for Your New Cat" and read and understood it. **X**\_\_\_\_\_ (initial)

I agree that all statements I have made on this form are true. If it is found that I am in violation of any of these statements checked above, my adopted animal may be confiscated.

Adopter Signature (**Must be 21**) **X**\_\_\_\_\_ Date\_\_\_\_\_

Adopter Printed Name \_\_\_\_\_

**REQUIRED:** Adopter Contact Phone (for follow-up purposes): \_\_\_\_\_

**REQUIRED:** Adopter E-mail (for follow-up purposes): \_\_\_\_\_

PURRS Authorized Signature **X**\_\_\_\_\_ Date\_\_\_\_\_

Paid (circle one):      Cash              Check              Charge              Exchange/Credit