

EASEL Animal Rescue League
ADOPTION CONTRACT

Please fill in information, check boxes and sign at the bottom.



4 Jake Garzio Drive
Ewing, NJ 08628
Phone: 609-883-0540
Fax: 609-631-8038
www.easelnj.org

The following animal is being adopted from EASEL Animal Rescue League on ____/____/____:

Name of Pet: _____ previously altered altered by EASEL: _____

Please provide date or reference number

Breed: _____ Color/Markings: _____ Sex: _____ canine / feline (circle one)

By signing this adoption contract, the adopter certifies that they have read, understood, and agreed to the following conditions (PLEASE INITIAL):

_____ I understand that the handling of dogs, cats and other domestic animals is potentially hazardous to me and all other persons handling the animal or otherwise in the animal's proximity and that by choosing to adopt the animal indicated above, I understand that there is a risk of injury and/or death to myself and others. Therefore, I hereby specifically assume any and all risks of accident and injury that may occur in connection with such handling.

_____ I hereby release, and give up any and all claims and rights that I may bring against EASEL for any loss, bodily injury, disease (including rabies), death, property damage or any other liability which I may incur, directly or indirectly, resulting from or arising out of this adoption.

_____ I will provide the animal with a good home and will give it proper care and kind treatment. If I am adopting a CAT, I agree it will be an indoor pet. Due to physical and emotional distress, EASEL does not condone cat declawing. All alternative solutions must be exhausted before declawing and must first be approved by EASEL in conjunction with a veterinarian. If I am adopting a DOG, I agree that I will not chain/tie it outdoors, nor permanently house it outdoors. The animal will never be sold or used for experimentation.

_____ I understand that any veterinary bills incurred after adoption will not be reimbursed by EASEL. In the unlikely event that this animal becomes ill within the first 72 hours of its adoption, I will contact EASEL immediately. Depending on the situation, EASEL may elect to authorize treatment by one of its veterinarians. This, however, is not a guarantee.

_____ I will obtain approval from EASEL if I intend to re-home this animal or euthanize for behavioral reasons. EASEL may be able to assist.

_____ I agree to have the animal evaluated and examined by a veterinarian within the first 15 days of adoption. I agree to provide annual veterinary care and seek care in emergencies, as needed.

_____ I will comply with all state/local laws governing the licensing/ownership of animals.

_____ I will not hold EASEL or any of its employees responsible for any defects the animal may now or later possess. If I must return the animal to EASEL for any reasons other than medical, I understand there will be no refund or exchange. If I return the animal to EASEL for medical reasons, I acknowledge that I must have a note from my veterinarian stating the medical condition. I understand that any return of the above animal after a period of 6 months has elapsed, EASEL will consider this animal to be an owner surrender case and will be subject to the review, considerations, fees, as such.

_____ I am aware that EASEL will not adopt a pet to a property where there is a prohibition against owning a pet by an owner, landlord, homeowners association, apartment manager, etc. and am not living in a situation where such a prohibition exists.

_____ I will allow EASEL's agents to examine the animal at any time; my right to possession is subject to and conditioned on my carrying out the terms of this agreement. I recognize that any violation of the above terms will be viewed by EASEL as a breach of contract and that EASEL may take possession of the animal if EASEL determines I have failed to comply with any of the terms of this agreement.

_____ I give EASEL permission to use any pictures taken of my family and new pet in EASEL publications such as, but not limited to, yahoo groups, newsletters and EASEL Facebook pages.

I understand and agree to the terms of this Agreement. I realize that by signing this Agreement, I am giving up certain rights and assuming certain liabilities, and I am doing so freely, willingly and with the knowledge thereof. I understand that this Agreement shall bind and extend to my heirs, executors, administrators, and representatives and to other members of my family.

Adopter's Signature: _____ **Date:** _____

Printed Name: _____ Phone number: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail address: _____

Adoption Amount \$ _____ Method of Payment: Cash / Check / Other: _____

Microchip number: _____ *please affix microchip label here*

EASEL Staff signature: _____