



Adoption Contract

Adopter's Name: Renee Dwyer	
Email: redwyer@sbcglobal.net	Phone #: 815-355-4600
Address: 4529 S. Nancy Drive, Crystal lake, IL 60014	
Animal's Name: Begonia	
Breed: Lab mix	Color: Black
Sex: Female	DOB: 1/05/17
Vaccinations: (Vaccinations are performed and covered by rescue for age appropriate at time of adoption)	
Rabies: Due: 5/05/17	Heartworm Test: Due: 7/05/17
Da2p+CPV Vaccine: 2/17/17 Due: 3/17/17, 4/14/17	Spay/ Neuter: Due: 7/05/17
Fecal Test: 2/27/17 Clean	Bordetella: Due: 7/05/17
Microchip:985 112 008 500 106	Wellness exam; 2/20/17

By my signature below, I affirm that I have read, understand, and agree to the following terms of this agreement. I understand that non-compliance with the terms of this agreement gives the adopting agent/ former owner the right to reclaim this animal without refund of adoption donation. . Please allow 7-10 days for your family to adjust to the new pet & for them to adjust to you. If during the first 30 days from the date below, you decide to not keep this animal, 50% of the adoption donation will be refunded to you.

- An adoption fee of **\$325.00 + \$50.00 spay deposit** will be collected at the time of adoption.
- This animal shall be kept and cared for as a family pet in a safe and humane manner and given appropriate shelter, attention, training, and medical care, **including monthly heartworm preventative (dog only)**, for the duration of its life.
- All vaccinations have been performed as appropriate by the age of the animal when adopted. I understand that it is my responsibility to provide additional vaccinations as appropriate by age, state laws, and as deemed necessary by my veterinarian.
- I agree to become familiar with and abide by all state and local animal control and leash laws.
- I understand that Hoof, Woof & Meow Animal Rescue, former owner/agent, makes no guarantees or warranties regarding the health or temperament of this dog. In the estimation of Hoof, Woof & Meow Animal Rescue, this animal has no defects that would make it unsuitable as a family pet. Any known ailments of above said animal have been disclosed to me as follows;
- I agree to adopt this animal and to be solely responsible for this animal and any damages that may result from its actions. Hoof, Woof & Meow Animal Rescue and its agents shall not be held liable for the behavior of this animal or any damages it may cause.
- I agree that if at any time during its life I choose to give up this dog, it is to be returned to Hoof, Woof & Meow Animal Rescue, the former owner/agent. This animal shall not be abandoned, sold, given away, taken to a shelter or transferred to any other person or organization without the consent of the former owner/agent.
- Any animal adopted under 6 months of age must, in accordance with state law, be sterilized by 6 months of age and receive its rabies vaccination by 4 months of age. Proof of such must be sent to Hoof, Woof & Meow Animal Rescue.

Hoof Woof and Meow Animal Rescue shall not be responsible for any damages, costs, or expense resulting from adopting an animal, including but not limited to damages, injury or illness to persons, other animals, or personal property. Hoof Woof and Meow Animal Rescue shall be held harmless from any and all liability of any and every nature and cause, directly or indirectly relating to the adoption of any animal through this organization.

I have read the Adoption Contract. I understand it completely and accept the rights and obligations involved.

Adopter Signature:  Date: 3/4/2016
Alana Woodbury

Adoption Authorized By: _____ Date: 3/4/2016

Representative for Hoof, Woof & Meow Animal Rescue

129 E Higgins Rd, Gilberts, IL 60136

(847) 836-7387

info@hoofwoofmeow.org

http://www.hoofwoofmeow.org



HOOF, WOOF & MEOW ANIMAL RESCUE

Spay/Neuter Contract for Hegonia

I, Renee Dwyer agree to all of the ALL following:

RD Said dog will not be used for breeding purposes.

RD To have said dog spayed/neutered on 7/5/2017, but no later than 8/5/2017.

RD If I use a HWMAR preferred veterinary provider, the cost of the sterilization procedure will be covered by HWMAR. I can elect to pay for pre-op blood work and fluids during surgery at my own expense, as these are optional. I understand that I am responsible for any costs associated with the sterilization other than the procedure itself, which includes, but are not limited to medications, follow up consultations, tests and other procedures.

RD That if HWMAR is paying for the sterilization through an approved veterinarian, I must contact HWMAR at 847-836-7387 to schedule the appointment and to ensure proper billing arrangements. Failure to notify HWMAR may result in HWMAR not paying for the procedure.

RD I have paid the adoption fee of \$325 and an additional spay/neuter deposit of \$50 for said dog. Hoof, Woof, & Meow Animal Rescue Inc. must receive the attached confirmation of sterilization stamped by a licensed veterinarian within 30 days of the procedure and the \$50 spay/neuter deposit will be refunded. If we don't receive written confirmation within 30 days of surgery we will assume the \$50 deposit to be a donation to HWMAR.

RD Failure to spay/neuter said dog by the above date will result in forfeiture of the dog and the adoption fee (except in the case of delay for medical reasons, verified by a licensed veterinarian).

RD If I choose to use a non-HWMAR approved veterinarian I will be responsible for the full cost of the procedure and any related expenses. I'

RD This spay/neuter agreement constitutes final notice of the spay/neuter requirement and no further notice is required to institute legal action for violation of the terms of this contract.

I have read and understand the above and agree to abide by its content:

Name Renee Dwyer
Address 4529 S Nancy Drive, Crystal Lake, IL 60014
Phone 815-335-4600

Renee Dwyer
Signature of Adopter:

Date: 3/4/2017

Alana Woodbury

Date: 3/4/2017

Hoof, Woof, & Meow Animal Rescue Inc representative