# SNIP - Adoption Agreement

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| **NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY:\_\_\_\_\_\_\_\_\_\_\_STATE: \_\_\_\_\_\_\_\_ZIP: \_\_\_\_\_\_\_\_\_**  **Animal’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB/Age:\_\_\_\_\_\_\_\_\_\_\_\_ Sex:\_\_\_\_\_**  **Description of CAT/KITTEN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BREED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLEASE REMEMBER TO FOLLOW THROUGH WITH ALL CAT/KITTEN SHOTS & RABIES**  **(See paperwork regarding next shot). It is recommended that you also have your kitten tested for feline leukemia at 6 months.** |

**INITIAL EACH ONE BELOW:**

\_\_\_\_\_\_I agree that I am adopting the above-described animal solely as a pet for myself and/or my immediate family. I agree that I will not sell, give away or otherwise dispose of said animal to any person(s) or other entity for any reason without the prior approval of **SNIP**. ­­­\_\_\_\_\_\_**If at a later date I am unable or unwilling to keep this animal, I agree to contact SNIP and give SNIP the opportunity to take back the pet.** I also agree to care for this animal in a humane and responsible manner and to provide it with clean and appropriate shelter, food, water, exercise, companionship and veterinary care.

\_\_\_\_\_\_ SNIP WILL PROVIDE A $20.00 COUPON TOWARDS THE PETS SPAY OR NEUTER. CALL 926-1196 / WEBSITE FOR COUPON IF THE PET HAS NOT ALREADY BEEN SPAYED OR NEUTERED.

\_\_\_\_\_\_ I understand that I can return the pet to **SNIP** within 10 days of the date of this Agreement and **SNIP** will refund the entire adoption fee paid. I also understand and agree that the adoption fee I paid to **SNIP** is reasonable and is not refundable after 10 days from the date of this adoption agreement even if I return the animal to **SNIP.**

\_\_\_\_\_\_ I understand that **SNIP** takes every precaution to assure the health of its adoptable animals, but can make NO GUARANTEE of any kind regarding the health and/or temperament of the animal I have adopted. I understand that I, as the adopter, am financially responsible AND liable for the animal upon signing this document.

\_\_\_\_\_\_ I give my permission for an agent of **SNIP** to visit the premises where the adopted animal is living, given reasonable notice. I further give permission for a **SNIP** agent to remove said animal from my premises if **SNIP** determines that the animal is not receiving appropriate care or if I have violated this agreement. Such entry onto my property shall not constitute trespass upon the premises occupied.

\_\_\_\_\_\_ I certify that all of the statements made by me on this adoption agreement are true and correct. I agree that **SNIP** has the right to confiscate the adopted 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.

**Adopter’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Image result for KITTEN PAWAdoption Fee $\_\_\_100.00\_\_\_\_\_\_\_\_\_\_ **THANK YOU FOR ADOPTING ME!**  **Additional Donation** + \_\_\_\_\_\_\_\_\_\_ ***PLEASE DONATE: The cost for shelter to get me ready***  ***for adoption is 160.00 and up.***  TOTAL PAID $\_\_\_\_\_\_\_\_\_\_\_\_\_  **REMEMBER: I can be returned to SNIP anytime in my life - if at a later date you are unable or unwilling to keep me.**  **541- 531-1085 – ALISA FRASER**  SNIP- 218 EXECUTIVE COURT, YREKA, CA 96097  EMAIL: [SISKIYOUSNIP@GMAIL.COM](mailto:SISKIYOUSNIP@GMAIL.COM). FACEBOOK PAGE: SNIP of Siskiyou County WEBSITE: SISKIYOUSNIP.ORG |