

HALF-WAY HOME Animal Rescue Application / Contract for Adoption

NOTE: AS A RESCUE – WE CANNOT GUARANTEE “HEALTH, BEHAVIOR OR BREEDING” – ADOPTIONS ARE “AS IS”

Thank you for considering the adoption of an animal from Half-Way Home Animal Rescue (HWHAR). WE MUST be assured that the pet you wish to adopt is best suited for you - we require the following questions be answered fully and honestly.

Please NOTE: If application is not legible – we will not contact you

Please Email to Info@hwhanimalrescue.com

How did you hear about us	
Website	_____
Facebook	_____
PetFinder	_____
Referral	_____
Other	_____

Rules of Adoption / POLICY

1. All animals adopted MUST be **spayed/neutered** & stay up to date on all vaccines for their entire lifespan (includes **heart worm preventative for the lifespan of the canines**)
2. **ALL ADOPTERS ARE REQUIRED to take new pet to own vet within 14-days & email proof of purchased heartworm prevention (for canines).**
3. Be financially able to provide for the needs of the animal(s).
4. Have adequate time and facilities to care for the animal(s).
5. Have the consent of all adults residing in the household and be at least **21** years of age.
6. Be aware that few animals are perfect; be prepared to give PET(S) time to adjust/transition into its new environment.
7. This IS AN ADOPTION; we reserve the right to postpone or refuse any adoption that is not in the best interest of any animal.
- 8 **Understand - you are adopting a pet 'AS IS'. HWHAR offers no guarantees on Pet(s) health, breeding and behavior.**
9. **ALL ADOPTION FEES ARE FINAL & FORFEITED AT TIME OF ADOPTION. NO REFUNDS.**

TODAYS DATE _____

If you want to adopt more than 1 pet - please mark

Pet 1st Choice (Name) _____

Color/Description _____

Pet 2nd Choice (Name) _____

Color/Description _____

Pet 3rd Choice (Name) _____

Color/Description _____

Adopter Information *(Please be LEGIBLE and PRINT CLEARLY your Email – If we cannot read it – you will not be contacted)*

Adopters Name (s) _____

Driver’s License/State ID # _____

Street Address & Apt-Condo# (If applicable) _____

City / State / Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

(Please be LEGIBLE and PRINT CLEARLY your Email – If we cannot read it – you will not be contacted)

Have you ever adopted from our organization before? (“X”) _____ YES _____ NO

If Yes, When and What Type & Name of Pet? _____

Part of our commitment to successful adoptions, we keep in touch with Adopters. Do you object to a HWHAR rep contacting you at your home? _____ YES or NO _____ If yes; then why? _____

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Do you have a fenced-in Yard: _____ **YES** _____ **NO** (Size: _____ **SM-MED / Large Acres** _____)

Household Facts ("X" all that apply):

"X" if you have children who live with you under age of {(15) _____ / (Age 10) _____ (Age 5) _____ Do Children visit? _____

"X" your household activity level: _____ **Quiet** _____ **A c t i v e** _____ **Hectic**

"X" Do you live in: House (_____ Own _____ Rent _____ Live with Parents) / _____ Apt. / Condo / _____ Mobile Home

Personal Pet History and Experience

First Time Dog Owner: _____

Currently have Cat _____

What is your Experience with Pets ("X" All That Apply)

First Time Cat Owner: _____

Currently have Dog _____

Had Pets as Child _____

Currently have "Other Pet" _____

How much do you expect to spend on veterinary care for your new pet in the next year? _____

Please list the animals YOU HAVE BEEN FINANICALLY RESPONSIBLE FOR and have lived with you in the past (5) Five years

If you have/had pets - If you do not complete this section with all information requested - we cannot process your application

Pet TYPE(s) Name(s) and Breed	Spayed/Neutered	Age of Pet	REQUIRED Vet Clinic Name, City & Phone #	Still Have	Ownership Length
<i>EXAMPLE</i> CAT / "MOLLY"	YES or NO	<i>EXAMPLE</i> 14 YEARS	<i>EXAMPLE</i> MIDWEST ANIM HOSP. 708-123-4567	Y / N	<i>EXAMPLE</i> 12 YRS
	_____ YES/ NO _____			_____	
	_____ YES/ NO _____			_____	
	_____ YES/ NO _____			_____	
	_____ YES/ NO _____			_____	
	_____ YES/ NO _____			_____	

What personality traits are you looking for in your new pet? _____

Where will you keep your pet during the day? _____ at night? _____

How long will the pet be without human contact during day? _____

What type of protection and shelter do you have outside for your pet? _____ N/A or Please explain:

Are there any behavior problems that you feel would be unable to live with? _____ **YES** / _____ **NO**

If yes; please describe _____

Why are you adopting? ("X" all that applies _____ Companion for Self / _____ Companion for another Animal
 _____ Pet for Child / _____ Protection / _____ Mouser-Barn Cat / _____ Hunting Dog / _____ Office Pet /
 _____ Gift / OTHER (Explain) _____

"X" if you have a certain type of cat or dog in mind? _____ **Yes** / _____ **No** / Note: _____

"X" if you plan on de-clawing your cat? _____ **Yes** / _____ **No / Unsure** _____ (If Unsure Why?)

How much time do you have to interact with your new pet? ("X" all that applies) _____ Will be at home or work
 _____ Minimal interaction during week / _____ Lots of time on the weekends / _____ Will be my constant companion

CAT/KITTENS: How will you resolve problems such as clawing on furniture or failure to use litter box?

DOG/PUPPIES How will you resolve problems such as behavior issues, chewing or house-training issues?

How will pet get exercise: (CAT: Please explain) _____

(DOG: "X" what applies) _____ Leash Walks / _____ Running Loose / _____ Fenced in Yard / _____ Tie Out (lead)

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ADOPTER AGREES TO THE FOLLOWING CONDITIONS FOR THE ADOPTED ANIMAL:

To be filled out by RESCUE: The Adopter pays Non-Refundable adoption fee (DONATION) of \$ _____. HWHAR Initials: (____)

ALL ADOPTION FEES ARE FINAL & FORFEITED AT TIME OF ADOPTION. NO REFUNDS IF PET IS RETURNED

Table with 3 columns: Fee Category, FEES - DOG ADOPTIONS, FEES - CAT ADOPTIONS. Rows include Sterilized Pet Adoption Fee (\$500.00) and Seniors (Age 9+) (\$300.00).

I understand that submitting this application does not guarantee the adoption of a pet from HWHAR. HWHAR reserves the right to reject any applicant.

The Adopter shall take the animal to a veterinarian within (14) days of adoption for; checkup, shots, medication recommended by veterinarian (+ monthly heart-worm preventative for dogs) YOU ARE REQUIRED TO EMAIL PROOF OF PURCHASE OF A 6 MONTH OR 12 MONTH SUPPLY OF HEART WORM PREVENTATIVE. HWHAR makes no representations/warranties as to the breeding, health, welfare, or behavior of the animal.

If pets are not sterilized at time of adoption due to a medical condition or age HWHAR will arrange for the spay/neuter to be performed at a clinic of HWHAR Choosing and expense for procedure will be pre-paid on day of appointment by HWHAR directly to clinic.

Adopter shall provide animal with humane care; maintain in accordance with all current/future state, county, municipal laws, and ordinances where Adopter resides (animal shall reside at the Adopter's address). The Adopter must provide a collar and identification tag for animals to always wear; provide food, water, shelter, veterinary treatment throughout its lifetime.

The Adopter agrees that it is the Adopter's responsibility to accept and adopt the animal "As-Is". The adopter understands that HWHAR and its representatives have limited information regarding the health, temperament or habits of the animal adopted.

HWHAR may make inquiries and/or examine adopted pets at any time. If rescue determines that the adopter is not providing adequate food, shelter, veterinary care or is otherwise in breach of any of obligations herein, rescue shall be entitled to take the adopted animal back and decide for the dog's care and re-adoption - with no refund of fees given.

If Adopter cannot keep adopted animal, Adopter shall notify HWHAR immediately. The animal shall not be sold, transferred, relinquished, or given to any individual or retail or wholesale establishment for the purpose of sale/resale to the public or any research institution where medical experimentation or other practices take place.

I declare that the information I have provided in this application is complete and correct. I further declare that I have read and understand the entirety of this contract and that I am financially and physically able to care for a rescued pet. I understand that proper food and veterinarian care may be costly, and I am able and willing to meet the needs of my adoptive pet.

Adopter(s) Signature(s)

Date