

**Animal Medical Center of Lehigh Acres
Pet Adoption Agreement**

Adopter _____ **Adoptee** _____
Address _____ Address _____
Phone _____ Phone _____

I acknowledge receiving a pet from this facility identified as follows:

Name _____ Approximate Age _____
Breed _____ Color _____
Sex _____ Weight _____
Microchip _____

AMC Responsibility:

- The first set of puppy/kitten vaccinations or the initial vaccinations.
- Fecal floatation test and dewormer.
- Testing for heartworm disease/feline leukemia/aids
- Spay or neuter.
- Sample of the food the pet is currently eating.

Adopter's Responsibility:

- The county license.
- Annual vaccinations and testing.
- Provide or purchase leash and collar to bring pet home.
- Microchip implantation.
- In the event the adopter is moving, it is their responsibility to have the microchip information updated and they are also responsible for any fees that may involve.
- An adoption donation is greatly appreciated.

I agree (please initial each statement):

_____ To provide proper and adequate food, water, housing, exercise, and grooming for this pet and to treat him/her humanely at all times.

_____ To provide veterinary care in the form of vaccinations, preventive heartworm medications as appropriate, and such veterinary medical care as is necessary to prevent and/or treat accidents and illnesses.

_____ To obey local licensing and animal confinement laws.

_____ Not to sell, give away, or abandon the animal if I no longer desire it but, instead, to return him/her to the above veterinary practice.

_____ Not to sell, give away, or use this animal for experimental purposes, allow him/her to engage in dog fighting, or pursue any guard dog or attack dog training with him/her.

_____ That my place of residence in a home, apartment, condominium, townhouse, public housing complex, or other housing complex allows for the ownership and occupancy of the pet I am adopting.

I acknowledge that (initial each statement):

_____ I have been informed that all animals can carry and transmit diseases, some of which affect people, including bacteria, viruses, parasites, and ringworm, and that these diseases may be undetectable in what appears to be a healthy animal at the time of adoption.

_____ I am aware that pets may exhibit normal but potentially undesirable behaviors including, but not limited to, aggression, house soiling, biting, scratching (people, furniture, and woodwork), barking, digging, mounting people's legs, marking with urine (dogs), and spraying urine (cats), and that these normal behavior patterns may be difficult to manage. No one at this facility has told me that this pet will **not** engage in any of these behavior patterns. If any behaviors that are undesirable to me occur, I will contact the Animal Medical Center of Lehigh Acres for a phone consultation, utilize their website for educational material (www.amc-la.com) and/or contact a professional trainer or behaviorist.

_____ The above veterinary practice is in no way responsible for any damage the animal may inflict on another person, my property, or the property of another, and no attempt will be made by me to hold the above practice responsible.

_____ I am aware that, depending on size, species, and/or breed, costs to feed, house, train, license, and provide pet health insurance and/or veterinary care for a pet average between \$500 and \$1,500 per year. I am financially able to meet and will pay these expenses for my adopted pet.

_____ I accept the animal as it is at the time of adoption and understand that the above veterinary practice is not responsible for any medical conditions not readily detected prior to or at the time of this adoption or discovered after such adoption.

_____ I have read this agreement and release the above practice from any present or future liability associated with my adoption of this animal.

Signature of Adopting Owner

{CURRENTDATE[SHORT]}
Date

General Release of Liability

This agreement is made and entered into by the Owner listed above, hereinafter "Owner" and The Animal Medical Center of Lehigh Acres.

Please read and initial each statement:

_____ Owner hereby agrees that he/she is solely responsible for all injuries, harm, damages, and losses of any type caused by owner or his/her pet or adopted pet. Owner further agrees that The Animal Medical Center will not in any way be responsible or liable for any injuries, harm, damages, losses of any type whatsoever sustained by owner, owner's pet or adopted pet, any of owner's property. Further, Owner agrees to indemnify and hold The Animal Medical Center, its owners, officers, agents and employees harmless from any and all claims or lawsuits of any type arising out of Owner and his/her pet's or adopted pet's conduct and to be solely responsible for all payments of any type, including costs, legal fees or payments of any type The Animal Medical Center might incur, that may become due because of the conduct of Owner or his/her pet or adopted, even if The Animal Medical Center is wholly or partly negligent in any way.

_____ I certify that I have carefully read and understand the rules and regulations set forth on the preceding pages and that I have fully read and understand this agreement and any terms I did not understand, have been sufficiently explained to me. I agree to abide by the rules, regulations and fees and accept all the terms, conditions, and statements of this agreement.

Owner's Signature

Date