



Animal ID:

Pet Adoption Application

All information must be complete, adopter must be at least 18 years old, and have a valid photo ID.

APPLICANT INFORMATION

The animal will be living at my : <input type="checkbox"/> Local address <input type="checkbox"/> Permanent address		
Full Name:	DOB:	State issued ID/DL No:
Street Address: (where this pet will reside)	City/State:	Zip:
Tel:	Email:	
Do You: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Housing: <input type="checkbox"/> House <input type="checkbox"/> Apartment	
Property Owner/Manager:	Property Owner/Manager Phone:	
Permanent address (if different from above):		
Address:	City/State:	Zip:

PET INFORMATION: (list all pets living on the property, where the adopted animal will reside)

PET'S NAME	BREED/TYPE	AGE	SEX	SPAYED/NEUTERED?	INSIDE PET?
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Vet/Clinic name: _____

Vet City and State: _____ Vet phone: _____

ADDITIONAL INFORMATION

If this dog tests positive for heartworms do you still want to adopt? YES NO

Is this pet for you or someone else? Me Someone else

If this pet becomes sick/injured, I will be able to pay several hundred dollar vet bills. YES NO

Are the pets you have now current on all vaccinations and required licenses? YES NO

Please Note: Nacogdoches Animal Services and Adoption Center reserves the right to refuse the adoption of any animal that the organization feels is an unsuitable/ unsafe match for either the animals or the families health and safety. Falsifying any information on this application will result in immediate denial of your application and all future applications.

SIGNATURE: _____	DATE: _____
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Pet Adoption Agreement

I understand and agree to the following pet adoption terms and conditions *(please initial each)*:

	The animal that I am adopting must have a complete health check by a licensed veterinarian within one (1) week of the adoption date, AT MY EXPENSE . The shelter does not have a staff veterinarian and cannot guarantee the health of the animals.
	Nacogdoches Animal Services has administered the first set of vaccinations to the pet that I am adopting, which do not fully protect against diseases that could be transmissible to the pets living within the shelter environment. I also understand that the pet I am adopting will require additional vaccinations, at my expense.
	If I must re-home my pet in the future I will contact Animal Services to give them the current owners contact information. If I re-home prior to alteration, I will bring the new owners to the shelter to transfer ownership and legal alteration responsibilities to the new owner. If I do not, I understand that I will remain legally responsible for the alteration of the animal.
	I will be a responsible pet owner and abide by all ordinances of the City of Nacogdoches, or the jurisdiction in which I reside, including requirements for rabies vaccinations and pet licensing/registration.
	If my pet is lost or stolen I will notify animal services. If it is taken to the shelter, I will promptly reclaim my pet.
	Should the adopted animal become sick or be deemed unsuitable within fourteen (14) days of the adoption date (with proof of the required health check), I have the following options: <ul style="list-style-type: none"> • Return the pet to Animal Services in exchange for another pet. • Return the pet to Animal Services within one week of the adoption date, for a credit toward the adoption of another animal. • Seek medical treatment at a veterinarian of my choice, AT MY EXPENSE. • Animal Services is unable to provide refunds.
	My animal will be sterilized in accordance with the law. Sterilization of the animal is required under Chapter 828 of the Texas Health and Safety Code. Failure to sterilize an adopted animal is a violation of this chapter and is a criminal offense punishable as a Class C misdemeanor.

SIGNATURE:

DATE:

SHELTER USE ONLY BELOW THIS LINE

ANIMAL INFORMATION

Species:	Breed:	Sex:	Age:	ID:
Date of Adoption:	Date of Alteration:	Vet. Clinic		

ADOPTION APPROVAL

Approved: YES NO

If no, reason for denial:

FINANCIAL INFORMATION

Adoption Fee:	Microchip:	City Tag:	Pet of the Week:	Total:
I would like to make the following donation to the City of Nacogdoches Animal Care Services:				Amount:
Total Amount Received				

