



2156 Pillsbury #155 • Chico, Ca. 95926 • (530) 895-8888

**Adopting a dog is a responsibility. Please do not take it lightly. We offer several tools that make it possible for you to keep your pet. You have access to us 7 days a week and most hours of the day, if you need advice. PetSmart also offers a free dog training lesson.**

1. All pets adopted from us must be returned to us if you are no longer able to keep them.
2. You must contacting us for advice or call a trainer, before you return a dog. If you return one, it must be done on a Saturday, before the adoption event and you must notify us at least 3 days in advance.
3. If you absolutely have to return a dog during any other time, there is a \$100 fee that will be charged, if there is room to take the dog in.
4. Deposits are non-refundable. Puppies are completely non-refundable after pick-up. Adult dogs are refundable up until 14 days from their adoption date.
5. If we must hold onto your newly adopted pet for more than 2 days before you pick up, there will be a \$10/day boarding fee. If you do not pick up your dog for more than 5 days without prior arrangement, we have the right to reclaim ownership of your pet.
6. Microchip registration will be transferred from us to you via the email address you provided on file. If you do not accept the microchip transfer from Found Animals when you get an e-mail from them, and the dog escapes, we have the right to reclaim ownership of your pet.
7. **Please keep in mind that your new pet probably came from a kill shelter where there are many other dogs. We make every effort to make sure you are given a healthy pet. Unfortunately, they may have issues that we are not aware of at the time of adoption. This may be due to stress from change or previous exposure which may cause your new family member to start exhibiting signs of an illness. You may utilize your free wellness exam or contact us for our support during most hours of the day if this happens.**
8. You have a **free** wellness exam vet visit voucher. Use it for a wellness check or if your new family member is ill. We will **not** reimburse you if you take the dog to another vet without prior authorization.
9. We provide the first years vaccinations for your newly adopted pet. All vaccines are done at our facility. For basic vaccinations, you may walk-in from 10-4 on weekdays, with the exception of our lunch break. Rabies and stitches removal require an appointment. Call (530) 895-8888 to schedule an appointment.
10. For dogs participating in our Foster-to-Adopt Program, we will provide basic vaccinations and spay/neuter but the current foster is responsible for other medical expenses that may occur with the dog.
11. When adopting a dog, make sure it's ok with your landlord, if you are renting.

**By signing and dating below, you acknowledge that you have read, understand and agree to the above.**

Sign \_\_\_\_\_

Date \_\_\_\_\_





## ADOPTION APPLICATION & AGREEMENT

<b>PET NAME:</b>		<b>TODAY'S DATE:</b>	
<b>Sex:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female		<b>Type of Pet:</b> <input type="checkbox"/> Cat <input type="checkbox"/> Dog	
<b>Approximate Age:</b>		<b>Spayed/Neutered:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No*	
Puppies under 6 months of age are non-refundable		<b>Microchip Info:</b>	
<b>Breed:</b>			
<b>Color:</b>			
<b>Type of Application:</b> <input type="checkbox"/> Adoption <input type="checkbox"/> Pre-Adoption* <input type="checkbox"/> Foster to Adopt			
*Pets that are not spayed or neutered must be pre-adopted. The animal will remain with Wags and Whiskers until the pet has been fixed and adoption fees have been paid in full.			

Are you at least 21 years old: ☐ Yes ☐ No

Are you currently a student? ☐ Fulltime ☐ Part-time ☐ No

Your Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

***Pet's microchip will be registered to this email***

Address: \_\_\_\_\_

Street	Unit #	City	State	Zip Code

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Work Email:

Driver's License #: \_\_\_\_\_ Driver's License State: \_\_\_\_\_

Name	Email or Phone Number	Age	Relationship to You

## WWPR APPLICATION & AGREEMENT

### Residence & Family Information

I live in a: ☐ home ☐ apartment ☐ condo ☐ mobile home That I: ☐ own ☐ rent ☐ live with parents

If you rent, do you have your landlord's permission to have/own a pet? ☐ Yes ☐ No

Landlord's Name: \_\_\_\_\_ Landlord's Phone #: \_\_\_\_\_

Do you have a yard? ☐ Yes ☐ No If yes, how big is the yard? ☐ Small ☐ Medium ☐ Large (over ½ acre)

How will you keep the pet on your property? ☐ fenced yard (height: \_\_\_\_\_ft) ☐ in the house ☐ pet run ☐ tied outside

Other: \_\_\_\_\_

Has everyone in the household met the pet? ☐ Yes ☐ No

Is everyone in the household willing to make a lifetime commitment to the new pet? ☐ Yes ☐ No

If not, why? \_\_\_\_\_

Have the children in your household been introduced to the pet? ☐ Yes ☐ No

Have the children in your household previously been around this type of pet? ☐ Yes ☐ No

Do you have children (not listed above) frequently visiting your home? ☐ No ☐ Yes – Ages: \_\_\_\_\_

Do you plan on leaving any children alone with the pet? ☐ Yes ☐ No

Does anyone in the home have allergies? ☐ No ☐ Yes, to ☐ Dogs ☐ Cats Other: \_\_\_\_\_

### Current Pets

Do you currently have other pets in the home? ☐ Yes ☐ No If yes, please list all pets below:

Species	Breed	Age	Sex	Spayed/ Neutered	Indoor/Outdoor
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out

Veterinarian's Name: \_\_\_\_\_ Veterinarian's Phone #: \_\_\_\_\_

### Past Pets

Have you had pets in the past that you no longer have? ☐ Yes ☐ No If yes, please list all pets below:

Species or Breed	Years Owned	Sex	Spayed/Neutered	Indoor/Outdoor	Reason you no longer own this pet:
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	
		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> In <input type="checkbox"/> Out	

Have you ever given up a pet? ☐ No ☐ Yes, because \_\_\_\_\_

Have you ever euthanized pet? ☐ No ☐ Yes, because \_\_\_\_\_

Are there any other reasons you have not kept a pet in for its lifetime? ☐ No ☐ Yes, because \_\_\_\_\_

Have you experienced any behavioral problems with past companion animals? ☐ No ☐ Yes

If yes, how did you address them? \_\_\_\_\_

## WWPR APPLICATION & AGREEMENT

### Pet Information & History

Do you own livestock animals? ☐ No ☐ Yes (list types) \_\_\_\_\_

What traits are you looking for in a pet? \_\_\_\_\_

Have you ever adopted an animal from this rescue before? ☐ Yes ☐ No

If so, do you still have it? ☐ Yes ☐ No, because \_\_\_\_\_

How many hours each day will the pet be left alone? \_\_\_\_\_

Where will the pet be kept when alone? \_\_\_\_\_

Where will the pet sleep at night? \_\_\_\_\_

Where will the pet be when you are at home? \_\_\_\_\_

### Pet's Exercise

☐ \_\_\_\_\_ miles of walking or running a day

☐ Let the pet run free in the yard

☐ \_\_\_\_\_ (number) long walks a day

☐ Minimal exercise during the week, lots on weekends

☐ \_\_\_\_\_ (number) short walks a day

☐ Little to no exercise

☐ Other: \_\_\_\_\_

### Reasons Applicant Would Give Up this Pet

☐ You move to a new home

☐ Pet is not house broken

☐ Pet runs away

☐ Pet becomes too active

☐ Pet does not get along with other pets in the household

☐ Pet becomes larger than expected

☐ Pet does not get along with other people in the household

☐ You do not enough time to spend with animals

☐ Pet nips at children

☐ Divorce or Separation

☐ Pet jumps on children/knocks them down

☐ Financial reasons

☐ Pet gets too old

☐ Pet develops health problems

☐ Excessive barking

☐ Excessive digging

☐ Excessive chewing

☐ Excessive drooling

☐ Excessive shedding

☐ Excessive smells

☐ Excessive separation anxiety

☐ Excessive marking

### Members of Household

List ALL residents in your home (including yourself):

Name	Email or Phone Number	Age	Relationship to You
			SELF

## WWPR APPLICATION & AGREEMENT

### The Applicant agrees to the following:

1. Wags and Whisker's reserves the right to decline any application.
2. Be at least 21 years of age or have special consent from a Wags and Whisker's representative.
3. Have a valid driver's license or other government issued ID
4. Have the consent of your landlord to have the pet, if renting.
5. The adoption fee becomes non-refundable 14 (fourteen) days from the date of adoption, which, unless otherwise indicated, is the date of this Adoption Agreement.
6. To not keep the Pet on leased or rented property where a "No Pets" policy is in force
3. To provide adequate fresh food and water, clean and dry shelter, and daily exercise. The pet will not sleep outdoors or be left outside in bad weather.
4. To not tether the Pet in a manner causing it to suffer, or to confine the Pet in a cruel manner.
5. To obey all applicable laws governing control and custody of pets.
6. To provide a safe collar with the Applicant's contact information.
7. To provide and finance all medical care and treatment needed by the Pet from the time of transfer. Normal health care is to include annual medical checkups, any vaccinations recommended by your veterinarian, and preventive flea and heartworm medications.
8. To keep the Pet only as an indoor, personal pet and companion, not as a gift and the Pet is never to be used for research purposes.
9. To hold Wags and Whiskers blameless for injury or death that pets in the adoptive house may incur. Care should be taken to acclimate the Pet to its new home and its inhabitants.
10. To pay all costs, including attorneys' fees, if Wags and Whiskers must take action against the applicant or his or her representatives or agents to enforce any of the terms of this agreement.

11. \_\_\_\_\_ **(initial)** To accept the liability for and to take steps to prevent any damaging pet behavior. Wags and Whisker's does its best to provide an accurate description of the Pet before adoption, Pet behaviors may change in a new home environment. While in the care of Wags and Whiskers, the Pet displayed the following behaviors (may not apply):

☐ Not cat friendly   ☐ Not dog friendly   ☐ Not kid friendly   ☐ Other \_\_\_\_\_

This description does not guarantee that the Pet will always exhibit such behavior or that it will not develop new behaviors; it is simply meant to describe the Pet's personality as exhibited while in Wags and Whiskers care. These behaviors were documented by a person who is neither a professional, nor certified behaviorist nor trainer. Wags and Whiskers MAKES NO WARRANTIES, EITHER EXPRESS OR IMPLIED, AS TO ANY MATTER WHATSOEVER, INCLUDING, WITHOUT LIMITATION, THE CONDITION OF THE PET, ITS MERCHANTABILITY, OR ITS FITNESS FOR ANY PARTICULAR PURPOSE. APPLICANT ACCEPTS THE PET ON AN "AS /S" BASIS.

12. \_\_\_\_\_ **(initial)** Unusual conditions for the contract (may not apply): \_\_\_\_\_
13. \_\_\_\_\_ **(initial)** **For Check Payments:** To pay a **\$25** service charge on any returned checks. If a check is returned by your bank, **for any reason** and the Applicant does not pay the total amount due, to include any service charges, within two weeks of written notification, it will be considered a breach of this Agreement and ownership of the Pet shall revert to the Wags and Whiskers.
14. \_\_\_\_\_ **(initial)** **Lost Pet:** If you lose any pet adopted from Wags and Whiskers, notify Wags and Whiskers IMMEDIATELY at **(530) 895-8888**

15. \_\_\_\_\_ **(initial)** **REPOSSESSION:** I understand and agree that in the event I do not comply with, or follow the terms of this Agreement, including any addendums, **ownership of the Pet shall revert to the Wags and Whiskers** giving the Wags and Whiskers the right to take possession of the Pet. I further agree to give permission for an agent or representative of the Wags and Whiskers to remove the pet from my premises and entry shall not constitute a trespass upon the premises occupied.

16. \_\_\_\_\_ **(initial)** **If I can no longer keep the pet, I will return the pet to Wags and Whiskers,** and not any other organization. I will NOT bring the pet to the pound. If I have found another home for the Pet, I agree not to transfer the Pet to this home until the prospective adopter has completed a formal adoption application and been approved by the Wags and Whiskers.

## WWPR APPLICATION & AGREEMENT

If the adopted pet is altered, please skip this section.

If the pet is not altered, the adopter understands the following:

- a. \_\_\_\_\_ (initial) **ALL PUPPIES must be fixed before going to their forever home.**
- b. \_\_\_\_\_ (initial) If an adult dog is not spayed or neutered at the time of adoption it may qualify to participate in our Foster to Adopt Program. Approval from a Wags and Whiskers Representative is required in order to participate. Ownership of the animal will remain with Wags and Whiskers until the pet has been fixed and adoption fees have been paid in full.

### Spay/Neuter Appointment Information (if applicable):

Date:

Time:

Location:

\_\_\_\_\_  
Applicant Signature:

- c. \_\_\_\_\_ (initial) If the Applicant misses the listed appointment for the first time, the Applicant must pay a **\$75** administrative fee to reschedule
- d. \_\_\_\_\_ (initial) If the Applicant misses the rescheduled appointment, Wags and Whiskers has the right to take possession of the Pet.

By signing below, the Applicant certifies that all the information provided in this application (in its entirety) is true and correct as of the date of submission, and I understand that my application may be denied if false information is given.

**Applicant (Your Information)**

**Wags and Whiskers Pet Rescue**

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



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### MEDICAL DISCLOSURE WAIVER

While at Wags and Whisker's Pet Rescue, your newly adopted dog may have been exposed to OR has recovered from an episode of Infectious Respiratory Disease (more commonly referred to as Kennel Cough or IRD).

- This condition is the equivalent of a "dog cold". We recommend all newly adopted dogs be seen by a veterinarian within a few days of adoption for a routine health check. IF your dog develops a hacking cough, discharge from the eyes and/or nose, lethargy, or loss of appetite, you should make an appointment with a veterinarian. Please be aware that some dogs may have later occurrences of these infections.
- IRD is normally very successfully treated with a combination of antibiotics and supportive care of a minimum of 10-14 days. Severe, untreated cases of IRD can develop into pneumonia, so it is important to discuss IRD with your veterinarian. We suggest you limit or prevent contact with other dogs for a minimum of 14 days after taking your new dog home. If your new dog happens to become sick, please consult with your regular veterinarian for further advice. If you own another dog and it becomes infected, you will be responsible for any veterinary care needed.

Any further medical expenses sought out after adoption, including those that may result from an undetected underlying condition, will be at your own cost.

Wags and Whisker's Pet rescue has informed me of known or observed medical issues with the animal I am adopting. I agree to care for this animal for the rest of its life in a manner that is necessary with these conditions.

I accept full responsibility for any treatment or warranted assistance and understand that Wags and Whiskers Pet Rescue will not be held financially responsible for the continued care of this animal.

**By signing and dating below, you acknowledge that you have read, understand and agree to the above.**

Adopter Name (Printed):\_\_\_\_\_ Dog Name:\_\_\_\_\_

Adopter Signature:\_\_\_\_\_ Date:\_\_\_\_\_





### PETSMART COUPON BOOK VOUCHER

Congratulations!! You're one step away from completing your adoption of your newest friend from Wags and Whisker's Pet Rescue! To claim your free coupon book, which includes a free bag of dog food, bring this voucher to:

**PETSMART in Chico at 2019 Forest Ave, Chico, CA 95928**

Your Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_



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### FREE WELLNESS EXAM

Your adoption comes with a free wellness exam at our facility in Chico.  
Please call Stacy at (530) 895-8888 to schedule an appointment.