

Pet Name\_\_\_\_\_

## **Another Chance Animal Rescue**

251 Country Club Rd (Rte 4) Sanford, ME 04073 (207) 490-2855

www.anotherchanceanimalrescue.org

## **CAT ADOPTION CONTRACT**

Breed:\_\_\_\_\_ Sex:\_\_\_ Age:\_\_\_ Color:\_\_\_\_

Daily Feeding Schedule: Water and Dry Fo	ood: 24/7	Wet:1X	2X	3X	Wet Amount:	_1-2 TBSP	_2+ TBSP
Type of Food:KittenAdult Food I	nfo:				House Training	<b>g</b> :Litter	Other
The animal you are adopting may require kept indoors. Your cat will be much safer when				or her n	ew home. It is man	datory that you	ur new cat is
This animal has received the medical Chance Animal Rescue. We recommend that yo animal may not be fully known, the health and	ur cat be exan	nined by a vet	erinarian				-
"By adopting this animal I understand following:	l that this is a	valid contract	, legally eı	ıforceabl	e in a court of law,	and as such I a	gree to the
<ol> <li>That the above described animal will be prefamily.</li> <li>To provide balanced and complete cat foods.</li> <li>To provide necessary medical attention, in</li> <li>That this cat will NOT be declawed without medically necessary.</li> <li>To have this animal spayed/neutered through have this animal spayed/neutered outside.</li> <li>To never sell, give away, trade, or transfer to care for this animal, I will return it to AC.</li> <li>That an ACAR representative may visit or a part of this contract has been violated, the</li> <li>The balance due on this contract shall be poits new home. If the balance is not paid in feconsidered a donation to Another Chance of the arrangements have been made by the</li> </ol>	d diet and frest cluding annual the written of the written of ACAR, I do guardianship AR make inquiries ACAR representation full by the due Animal Rescue	h water at all al checkups are consent of Anoce Anima so at my experience of this anima is about said a contative may the agreed update, this core, and the pet	times.  Ind recommother Chain  Rescue (  Inse.  I without the  I w	nended vonce Anim  ACAR) at the written any time, and the customer fore the and vonde availated availated.	accinations. al Rescue (ACAR) a t no expense to me. S/N Due Date: en consent of ACAR and if it is determinated of the animal. animal is allowed to bid, the deposit paicable for an alternate	If I choose to  If I am unable  and that any  o be taken to	<del>-</del>
Signature	Date	Date Street Address					
PRINT NAME	-		CITY		STATE	ZIP	
EMAIL ADDRESS	-		Mailing Address (If different from Street Address)				
ADOPT FEE  DEPOSIT  BALANCE DUE  PAL DUE DATE			CITY		STATE	ZIP	
BAL DUE DATE	ACAD Danracan	stativo	HOME/CEL# WORK#				