

COMPASSION FIRST

Post Office Box 2401

Tupelo, MS 38803

Phone – 662-842-4029 Fax – 800-464-0789

ADOPTION CONTRACT: PLEASE READ THE FOLLOWING REGULATIONS CAREFULLY, AND SIGN ONLY IF YOU AGREE TO THEM!

1. The Adopter agrees to provide proper food, water, shelter, and kind treatment at all times.
2. A fenced in yard is required unless animal is kept in the house. A leash is required for outside activity, unless confined by a fence or pen. No adopted animals will be allowed to run at large.
3. In compliance with Mississippi state law, the Adopter agrees that the animal will be vaccinated against rabies after the age of three (3) months or by the age of six (6) months, and agrees to license it in accordance with the laws and ordinances of the municipality where the Adopter resides.
4. The Adopter assumes full financial responsibility for the animal.
5. The Adopter shall provide the animal with necessary veterinary care upon sickness, disease or injury. In addition, the Adopter shall take the animal to a veterinarian at least once a year for an annual health examination and routine vaccinations.
6. The Adopter agrees to administer heartworm preventative as prescribed by Adopter's veterinarian. Adopter further agrees to maintain heartworm preventative for the life of the animal.
7. The Adopter agrees **not** to allow the animal to breed and to spay or neuter any unaltered animals within thirty (30) days of this adoption or by the age of six (6) months. Adopter agrees to provide proof of spay or neuter to Compassion First within above time period. Proof may be faxed to **800-464-0789** by either Adopter or Adopter's veterinarian or mailed to the above address. If proof is not provided, Adopter agrees that Compassion First has complete authority to confiscate said animal.
8. Adopter agrees that the adopted animal may not be used for medical or other experimental purposes.

9. The Adopter shall keep the animal as a household pet and shall not use it for breeding or exclusively as a guard dog, hunting dog, or mouser. The animal shall reside at the Adopter's address.

10. The Adopter shall provide a collar and identification tag for the animal to wear at all times if the animal is allowed to go outdoors.

11. The Adopter releases Compassion First and all parties connected to or with Compassion First in any way, from all liability for injury or damage sustained while the animal is in his/her possession.

12. If **for any reason** Adopter can no longer keep the adopted animal, said Adopter agrees to return the adopted animal to Compassion First. If said Adopter lives less than four (4) hours from Tupelo, MS, Adopter further agrees to pay all costs involved in returning the animal. In the event Adopter lives more than four (4) hours from Tupelo, MS, and is unable and/or unwilling to provide transportation for the return of the adopted animal, **Adopter agrees to pay a minimum of 50%** of all costs involved in returning said animal.

Adopter understands and agrees that the adopted animal can not be given away, sold, or exchanged without the prior written permission of Compassion First.

The Adopter agrees that any agent of Compassion First may visit the Adopter's home prior to or after placement of the animal. If the Adopter fails to comply with any of the terms above, Adopter agrees that Compassion First has complete right and authority to reclaim the animal. In this event, Adopter agrees to pay Compassion First **LIQUIDATED DAMAGES IN THE AMOUNT OF \$150.00**. The Adopter **ALSO** agrees to pay Compassion First any and all expenses, including court costs and reasonable attorney's fees, in enforcing the terms and provisions of this Contract.

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE AND AGREE TO THE SAME AND THAT THE CONTRACT IS UNDER SEAL

Adopter's Name: _____

Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Date: _____ Phone (Home): _____ Phone (Work): _____

Phone (Cell): _____ E-mail: _____

Animal's Name: _____ Dog: _____ Cat: _____

Breed: _____ Sex: _____ Approx Age: _____

Color Marking: _____ Must be Spayed/Neutered By: _____

Vaccinations Due: _____ Type _____

Adoption Fee: _____ Additional Information: _____
