



NEW ADOPTERS NEED THE FOLLOWING MAILED.
\_\_\_\_ Contract
\_\_\_\_ Medical Records
\_\_\_\_ Rabies Certificate

This Adoption Contract (the "Agreement") made and entered into on this date: \_\_\_\_\_
by 2nd Chance 4 Life Rescue (hereinafter RESCUE) and \_\_\_\_\_ (hereinafter
ADOPTER) regarding the adoption of

NAME: \_\_\_\_\_ (hereinafter ADOPTEE).
BREED: \_\_\_\_\_ GENDER: Male Female ID TAG # \_\_\_\_\_

Whereas ADOPTER has expressed an interest in adopting ADOPTEE; and whereas RESCUE has agreed to enter
into this binding contract with ADOPTER and whereas RESCUE and ADOPTER desire to have their rights,
obligations and duties specified herein. Now therefore, for and in consideration of the mutual covenants and
promises contained herein, the Parties, each intending to be legally bound, freely enter into this Agreement as
follows:

1. PURPOSE The ADOPTER hereby adopts and the RESCUER hereby places the ADOPTEE into
ADOPTER'S care as a companion dog and family member for the purpose of providing a permanent loving
home for the ADOPTEE and to further the work of RESCUER in reducing canine overpopulation and improve
the unnecessary suffering and destruction of unwanted companion animals.

2. CONSIDERATION. ADOPTER agrees to make a donation of at least \$ \_\_\_\_\_ to RESCUE to help
offset some of the costs that RESCUE incurs in the rescue and care of unwanted companion animals. ADOPTER
understand that their donation is a contribution freely given, not a purchase price or adoption fee; no goods
or services were provided in exchange for their donation. Donations are not refundable. ADOPTER agrees to
abide by all the covenants of this agreement in order to assure RESCUE that the ADOPTEE, as a unique form of
property, having both awareness and feelings, will be properly cared for, cherished and provided for by
ADOPTER in order to ensure ADOPTEE's continued and future happiness and well being.

3. CARE OF ADOPTEE

A. STATUS OF ADOPTEE. ADOPTEE is being adopted as a family member and will be given extensive
house privileges. i.e. Sleep inside the house, be allowed freedom of the house when the family is home, and
will NOT be restricted to the yard at ANY time. ADOPTER agrees that ADOPTEE will not be used as a guard
animal or as a toy for children, or for any other purpose than as a companion and family member.

B. SAFE ENVIRONMENT. ADOPTEE will be provided with proper food, shelter, fresh water at all times,
with ample room for outdoor exercise. ADOPTER will not use tie outs or underground fencing with ADOPTEE.
2nd Chance 4 Life Rescue will reclaim ADOPTEE on the spot simply by coming to the property with the
Director if it is found that the ADOPTER has violated this clause. No legal document other than this contract
shall be necessary.

C. VETERINARY CARE. ADOPTEE will be examined by ADOPTER'S veterinarian within seven days after
adoption and will be provided with medical treatment as needed. ADOPTER agrees that any veterinary
problems that may arise, including serious illnesses requiring emergency care or surgery and ADOPTER'S
responsibility and that ADOPTER will bear all related costs and will provide the best available care to ADOPTEE
in a timely manner. ADOPTER will email or send documentation of veterinarian visit within 14 days.

Adopter Initial & Date \_\_\_\_\_

\_\_\_\_\_ **D. IDENTIFICATION.** *ADOPTEE* will wear a collar at all times, with a 2nd Chance 4 Life Rescue ID tag AND a personalized identification tag including the name, address, and phone number of *ADOPTER* attached to the collar.

\_\_\_\_\_ **E. LEASH AND COLLAR.** *ADOPTEE* will be kept on leash when on public streets or in parks or other unfenced areas. *ADOPTEE* will be walked using a slip collar or harness and will **NOT** be walked at any time with a leash attached to *ADOPTEE*'s identification collar. *ADOPTER* understands that the identification collar is not a secure restraint and that if *ADOPTEE* manages to slip out of the collar; *ADOPTEE* will be loose without identification.

\_\_\_\_\_ **F. TRANSPORTING ADOPTEE.** *ADOPTEE* will be properly restrained, preferably using either a secured crate or seat harness, when transported in any vehicle. *ADOPTEE* will **NEVER** be transported in the back of an open vehicle or pickup truck and car windows will never be down far enough for *ADOPTEE* to fit through.

\_\_\_\_\_ **G. NO RIGHT TO TRANSFER/EUTHENIZE ADOPTEE.** *ADOPTER* will **NOT** transfer possession or ownership of *ADOPTEE* (by gift, sale, or any other means) to another person or entity, including any company, organization medical research facility, pound or animal shelter, or any other entity. If at any time in the future *ADOPTER* cannot continue to provide proper care or environment for *ADOPTEE* for any reason, or otherwise decides that *ADOPTER* no longer wishes to maintain possession or ownership of *ADOPTEE*, *ADOPTER* will notify *RESCUE* immediately and will do one or more of the following.

- \* Obtain approval from *RESCUE* to transfer the ownership of *ADOPTEE* to a friend or relative. *RESCUE* must approve the new *ADOPTER* and the new *ADOPTER* will be required to execute a "Dog Adoption Agreement" with *RESCUE*; or
- \* Continue to board *ADOPTEE* under all terms of this Agreement for an agreed upon time, allowing *RESCUE* to actively seek a new home, and then relinquish *ADOPTEE* to *RESCUE* when a home is found; or
- \* Return *ADOPTEE* to *RESCUE*.

*ADOPTER* will **NOT** euthanize *ADOPTEE*, and will **NOT ALLOW** adoptee to be euthanized, except in the case of terminal illness or injury, or old age accompanied by pain and suffering and in that case, the euthanasia must be performed by a licensed veterinarian in a private animal clinic or hospital. It is understood that if the *ADOPTEE* has become aggressive after living in the *ADOPTERS* care the *RESCUE* will have the right to refuse to accept the return of the *ADOPTEE* and require training or a physicians suggestion concerning the future of the *ADOPTEE*

\_\_\_\_\_ **H. CHANGE OF CONTACT INFORMATION.** *ADOPTER* will notify *RESCUE* of all changes of address and/or telephone within 30 days after the change.

\_\_\_\_\_ **I. NO OBLIGATION TO RETURN.** *ADOPTER* understand that if *ADOPTEE* is lost and is recovered by *RESCUE*, *RESCUE* has no obligation to return *ADOPTEE* to *ADOPTER* until it has completed a review of the circumstances involved in *ADOPTEE*'S loss. *ADOPTER* further understands that if the loss was the result of the negligence or failure to comply with the covenants of this Agreement, *RESCUE* reserves the right not to return *ADOPTEE* and to place *ADOPTEE* into a new home.

\_\_\_\_\_ **J. ESTATE PROVISION.** *ADOPTER* agrees to provide for care of *ADOPTEE* in their Will or estate. **2nd Chance 4 Life Rescue Adoption Agreement must be included.**

**Adopter Initial & Date** \_\_\_\_\_

\_\_\_\_\_ **K. NOTICE OF LOSS OR DEATH.** **ADOPTER** will immediately notify **RESCUE** if **ADOPTEE** is lost and will follow **RESCUE'S** instructions as to how best to recover **ADOPTEE**. **ADOPTER** will also notify **RESCUE** if **ADOPTEE** is deceased.

\_\_\_\_\_ **L. FOLLOW UP VISITS.** **ADOPTER** understands and agrees that **RESCUE** is fully entitled to make follow up visits or phone calls to ascertain that all of the covenants of this agreement are being satisfied. **ADOPTER** is obligated to cooperate with **RESCUE** in setting and keeping appointments.

**4. RIGHT TO RECLAIM.** **ADOPTER** understands and agrees that **RESCUE** reserves the right to reclaim **ADOPTEE** if any of the above conditions are not met to the satisfaction of **RESCUE**.

**5. NO WARRANTY.** **RESCUE** makes no warranty as to the temperament, breed, age, or physical condition of **ADOPTEE**. **ADOPTEE** is being adopted "as is".

**6. SPECIAL DISCLAIMER.** All warranties with regard to **ADOPTEE**, including any implied warranty of merchantability and fitness for a particular purpose, where they are applicable, are hereby specifically disclaimed.

**2nd Chance 4 Life Rescue  
Elizabethtown, PA 17022**

**7. RELEASE AND INDEMNIFICATION.** **ADOPTER** hereby releases **RESCUE** from any and all liability for personal injury, property damage, legal fees, or veterinary care, or any other expense or liability incurred by **ADOPTER** as a result of this adoption.

**8. SEVERABILITY.** In the event any provisions or covenants (or any portion thereof) of this Agreement shall be held invalid or unenforceable by any court of competent jurisdiction, such holding shall not invalidate or render unenforceable any other provisions hereof.

**9. GOVERNING LAW.** All question with respect to the construction of this agreement and the right and liability of **RESCUE** and **ADOPTER** shall be governed by the laws of the State of PA in effect as of the date hereof, regardless of the current or future state or county of residence of **ADOPTER**.

**10. ENTIRE AGREEMENT.** This Agreement sets forth the entire agreement and understanding between **RESCUE** and **ADOPTER**. No modifications of or amendment to neither this Agreement nor any waiver of any right under this Agreement will be effective unless in writing signed by the director or officer of **RESCUE** and **ADOPTER**. Any subsequent modifications or changes will not affect the validity or scope of this agreement.

Special Need Adoptee \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments/Clauses/Requirements for Adoption \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Adopter Initial & Date** \_\_\_\_\_

**ADOPTER**

**SECONDARY ADOPTER** (Spouse, significant other, etc)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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

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

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Home Phone/Work/Cell Phone

\_\_\_\_\_  
Home Phone/Work/Cell Phone

**RESCUE** (2nd Chance 4 Life Rescue) REPRESENTATIVE

\_\_\_\_\_  
Signature of Representative

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

**DONATION AMOUNT \$** \_\_\_\_\_ **(DONATIONS ARE NOT REFUNDABLE)**

Thank you for your gift. The expenses incurred by rescue are great but well worth every cent!

Micro Chip # \_\_\_\_\_

2<sup>nd</sup> Chance 4 Life Rescue MUST be named as 2<sup>nd</sup> Contact person when registering chip.

Foster PLEASE check boxes on first page of anything the secretary needs to send and mail signed contract and check to

2<sup>nd</sup> Chance 4 Life Rescue, PO Box 549, Elizabethtown, PA 17022

Adopter: Vet Well Check should be faxed by vet to 1-888-602-5891