

Bellas Tail Waggin Rescue Adoption Form

A pet adoption is a lifetime commitment.

If you are not sure you are ready for that type of commitment please consider that it is difficult for an animal to be adopted and returned.

We cannot guarantee any animal is house trained or has had any training.

All of the following questions must be completed to be considered. Fields with an asterisk () are required. If a required field does not apply, enter (Does not apply) in the field that does not apply.*

Contact and Household Information

*Applicants Full Name_____

*Street Address_____

*City_____

*State_____

*Zip Code_____

*Home Phone_____

*Cell Phone_____

*Email Address_____

*Occupation_____

*Employer_____

*Employers Phone Number_____

*Years At Current Job_____

*Names of Adults living in the home. (One name per line)_____

*Who will be financially responsible for the pet_____

*How many children are in the home and what ages_____

*Do any members of your household have any allergies to animals ___ Yes ___ No

If Yes, explain here_____

Residence Information

A letter from your landlord or apartment manager may be required if you rent.

*Do you own or rent ___ Own ___ Rent

*How long at current address_____

*Type Of Residence----House___Condo/Townhouse___Apartment___Mobile Home

If You Rent, does Your landlord allow pets___Yes___No___I Don't Know

Landlord's Name_____

Landlords Phone Number_____

Pet Information_____

Have you paid a pet deposit___Yes___No

*Animals in Home and Ages (One per line)_____

*Have you ever taken a pet to the shelter___Yes___No

If yes explain here_____

*Are your current pets spayed/neutered__Yes___No

If no, explain here_____

*What animal are you interested in_____

*What if your new pet does not get along with your existing pets_____

*Will your pet be kept? Indoors___Outdoors___Both_____

*Where will your pet sleep at night_____

*How many hours a day will your pet be left alone_____

Veterinarian Information

*Veterinarian's Name_____

*Veterinarian's Phone Number_____

*Veterinarian's Street Address_____

*Veterinarian's City_____

*Veterinarian's State_____

*Veterinarian's Zip Code_____

Personal References and phone numbers

*Reference 1_____

*Reference 2_____

*Reference 3_____

*Reference 4_____

Any additional information you would like for us to know?

This dog will reside in my home as a pet. I will provide it with quality dog food, plenty of fresh water, indoor shelter, affection, annual physical examination and vaccinations under the supervision of a licensed Veterinarian.

By signing I attest that all of the information I have given is true and complete to the best of my knowledge. I also understand there is an adoption fee of **\$250.00** to help cover vetting expenses that are given prior to adoption. I understand that the animals that are up for adoption are from animal shelters and full knowledge of the animal may not be known. I acknowledge that Bella's Tail Waggin' Rescue has informed me, to the best of their knowledge, about the animal being adopted and I will not hold Bella's Tail Waggin' Rescue owner or directors liable for any damage caused from the animal I am adopting. I hereby waive, release, and discharge any and all claims and damages for personal injury, death, or property damage which I may sustain or may which hereafter accrue as a result of my participation in adopting a rescue animal This release is intended to discharge in advance Bella's Tail Waggin; Rescue, its' Directors, Officers, and/or agents to include their heirs, agents, representatives, successors and assignees from and against any and all liabilities, actions, claims, demands, costs, or expenses arising from or in any way I understand that various activities involving dogs and/or puppies can be hazardous in nature involving the possibility of being bitten, scratched, jumped on, dragged or knocked over. The possibility of serious accidents and/or injury can occur. Knowing the risks involved nevertheless I have voluntarily applied to adopt a rescue animal and I hereby agree to assume all risks of injury, and to release and hold harmless Bella's Tail Waggin' Rescue its' Directors, Officers, and/or agents who through negligence or carelessness might otherwise be liable to me. I further agree to indemnify and to hold Bella's Tail Waggin' Rescue, its' Directors, Officers, and/or agents free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of any injury and/or property damage I may sustain from the adoption of a rescue animal

I hereby grant Bella's Tail Waggin' Rescue permission to use my likeness in a photograph/video or any photo/video that I upload to the Bella's Tail Waggin' Rescue Facebook page or designated repository (e.g. Flickr) in any and all of its advertising or collateral materials, including the Bella's Tail Waggin' Rescue website without payment or any other consideration. I hereby irrevocably authorize Bella's Tail Waggin' Rescue to edit, alter, copy, exhibit, publish or distribute any photos/videos taken of or by me for purposes of publicizing Bella's Tail Waggin' Rescue organization or for any other lawful purpose.

I HAVE CAREFULLY READ THIS WAIVER OF LIABILITY, MEDICAL RELEASE , PHOTO/VIDEO RELEASE AND INDEMNIFICATION AGREEMENT AND FULLY UNDERSTAND THE CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AGREEMENT BETWEEN MYSELF (AND MY GUARDIAN, if applicable) AND BELLA’S TAIL WAGGIN’ RESCUE.

Agreement:

Adopter Print_____

Adopter Signature_____

Date Signed_____

Witness:_____

Bella’s Tail Waggin Rescue Owner/ Director/ Volunteer

Signature_____

Typing your name above constitutes a binding legal agreement with Bella’s Tail Waggin’ Rescue.

Mail this form to:
Bella’s Tail Waggin’ Rescue
4529 Cattle Creek Road
Branchville, SC 29432