

THUNDERING PAWS ADOPTION CENTER, INC.

ADOPTER INFORMATION:

Name(s): _____ Date: _____
 Address: _____
 City _____ State _____ Zip _____
 Phone #: Home _____ Cell # _____ Work # _____ Email: _____
 Place of employment: _____
 Do you own or rent your home? _____
 If you rent, do you have permission to have this pet at your residence? _____
 Name and telephone # of Landlord _____
 Who is your veterinarian? _____ Phone # _____
 Under what name will your record be listed? _____

ANIMAL INFORMATION:

Animal's Name: _____ Description breed _____ Color _____
 Weight _____ Age _____ Sex: Male or Female Spayed or Neutered _____ DOB _____

PLEASE READ & INITIAL NEXT TO EACH ITEM AS ACKNOWLEDGEMENT AND CONSENT:

If animal has not yet been spayed or neutered, you must have this done by the age of 6 months or within 30 days of adoption if over 6 months. Date procedure must be done by: _____
 Do you agree to do this? (Refer to Page 2) _____
 Do you agree to take your pet to the veterinarian of your choice for regular examinations, wellness care and initial, booster and annual vaccines as recommended by your veterinarian? _____
 For dogs, do you agree to keep your new pet on monthly heartworm preventative and to get a yearly heartworm test? _____
 For cats, do you agree to get a yearly Felv (Feline Leukemia Virus) vaccine? _____
 Do you agree to provide a safe, permanent, loving home for the animal? _____
 Do you agree that the animal is being adopted as a family pet and that you will provide adequate nutritionally complete food, water, shelter, love, affection, attention, veterinary care and treatment? _____
 Do you agree that the animal will never be sold, given away, abandoned, abused, used for medical research or be relinquished to an animal shelter or animal control facility? _____
 Do you agree to keep your new pet on monthly flea and tick preventative? _____
 We do a home visit within the first month following the adoption. Do you agree to allow us to come to your home to check on your new pet's progress? _____
 I understand that _____ is not making any representations or warranties about the animal's behavior and is not responsible for any injury, damage, or harm caused by the animal. I release _____ from any such claim, cost, injury, damage, or liability I incur relating to the animal.
 You must agree to spay/neuter the animal, keep it current on vaccines, give monthly heartworm for dogs, and apply flea/tick preventative. At any time you can contact Linda and Thundering Paws for advice, help or assistance in re-homing your pet. If you lose your new pet's medical records, we keep a copy of them. We can be reached at 910-322-7013 (voice & text), email: linda2564@mac.com & 910-224-6068 (voice & text), email: thunderingpawsinc@icloud.com.

Applicants Signature: _____ Date: _____

Thundering Paws Representative Signature: _____ Date: _____

Donations are 100% allocated to animals and are greatly appreciated. Donation amount _____

Check payable to: Thundering Paws Pet Adoption Center, Inc.
 Mail to: 3350 Footbridge Lane, Ste 124, Fayetteville, NC 28306
 PayPal: PayPal link on Thundering Paws website thunderingpawsinc.org/How-You-Can-Help.php

THUNDERING PAWS ADOPTION CENTER, INC.

THUNDERING PAWS (TP) SPAY AND NEUTER FINANCIAL AGREEMENT

Please agree to one of the two options for spaying and neutering (S/N) your new pet if it is not S/N at the time of adoption.

OPTION 1 – Use of low-cost Spay and Neuter Clinic of the Sandhills through appointment arranged by TP.

I agree to pay a \$25 non-refundable deposit per pet, no later than 12 days prior to the scheduled appointment at the Spay and Neuter Clinic of the Sandhills in Vass, North Carolina. The \$25 deposit per pet will be applied to the total cost of the S/N procedure per pet and will secure my reservation to have my pet S/N by the date on my adoption contract.

I agree to make the \$25 per pet payment by:

- a) a \$25 per pet cash payment to the TP representative at the time of my scheduled home visit or
- b) a PayPal \$25 per pet payment. The PayPal link is available on the TP website:
thunderingpawsinc.org/How-You-Can-Help.

Please indicate in PayPal payment “notes” S/N deposit for your pet(s)’s name(s).

I select option 1: _____ (pet parent’s initials)

OR

OPTION 2 – Use of my personal veterinarian clinic

I agree to have my new cat/dog spayed/neutered at my personal vet. I agree to provide TP with proof from my vet that the spay/neuter procedure was completed by the date stated on my adoption contract.

I select option 2: _____ (pet parent’s initials)

BINDING CONTRACT

This Adoption Contract represents an agreement between Thundering Paws Pet Adoption Center, Inc. and the Adopter concerning the adoption of the Pet(s). The adopter has read, understands and agrees to abide by terms and conditions of this binding Contract in its entirety. The adopter confirms the information provided is complete and correct to the best of his/her knowledge. The adopter understands that non-compliance with the terms and conditions of this agreement or misstatement of the facts, grants Thundering Paws Pet Adoption Center, Inc. the right to reclaim the Pet with no donation refund or recourse due to the Adopter. Information provided regarding the Pet(s)’ temperament and health is based upon knowledge acquired during the time the animal has been under the care of the foster and may not reflect facts not available to Thundering Paws Pet Adoption at the time of adoption.

Adopter Signature:

Name _____ **Date** _____

Thank you very much for adopting!

Updated 5/6/19