



P.O. Box 159
Tillamook, OR 97141

Telephone: 503.842.5663
E-mail: unitedpaws@hotmail.com

Adopter: _____
Address: _____
Phone # _____

Staff Only Notes:

Vet Clinic: _____
Shots/Meds/Exam

Adopted Animal's Name: _____ Cat or dog? _____ Breed: _____
Sex: _____ Age: _____ Spayed/Neutered _____
Color & Description: _____

As the adopter, I agree to the following provisions:

1. If the adopted animal is not already altered, I agree to have him or her altered by this date:

2. I agree to keep an identification tag attached to a properly fitted collar that will remain on the adopted animal at all times, whether inside or outside of the house, and to obtain all city licenses required by local authorities.
3. I agree to provide yearly vaccinations and medical care as advised by my veterinarian.
4. My new companion animal will be securely confined to the house during the first several weeks to ensure successful acclimations to her or his surroundings. After that period of time, dogs should have a fenced yard or a long chain attached to an overhead cable in reach of adequate shelter and fresh food and water. They must be kept indoors at night. Cats who were previously declawed or have been raised strictly indoors must be kept indoors at all times. Only cats designated as indoor/outdoor cats at the time of adoption may visit the outdoors. For safety, all cats must remain indoors during the night.
5. I agree not to abuse or neglect my new pet. I intend to make this animal a member of my family. I realize that I am making a serious commitment to adopt a lifelong companion.
6. I understand that it takes time for new pets to acclimate to a new home. If a cat, I agree to follow the "2 Week Introduction" handout I have been given. I agree to give *my new pet one month* in its new home before I try to return it to United Paws. Unlike dogs, a cat is not a pack animal and is territorial. I understand it is normal for a cat to hide *the first week, and up to 4 weeks*, depending upon its temperament. It is also normal for them not to eat or use the litter box for up to 48 hours – but *no longer*. *If I have any concerns, health or behavioral, I will contact United Paws right away and work with an adoption counselor to aid me and my new pet in the transition process*

7. I agree to take responsibility for any medical bills incurred after today's date or for any damage that my new pet may cause to any person or property.
8. I have been educated as to the detriments of declawing a cat. I have been informed that declawing is amputation up to the first joint of each toe. I understand that this is a painful and debilitating procedure that can lead to behavioral problems as well as health problems. If I have any problems with scratching, I will contact the adoption counselor and my veterinarian for assistance in resolving the problem effectively and humanely.
9. If my companion animal should become missing or lost, I will contact the adoption counselor immediately. I will take the necessary recommended steps to help recover my pet.
10. I understand that any failure to perform the foregoing agreement will constitute a breach of contract. In the event of such a breach, I authorize the adoption counselor to reclaim possession and guardianship of the adopted animal.
11. I understand the adoption fee is not refundable in the event I return the animal.

Special conditions for this adoption: _____

Signature of Adoption Counselor

Date

Phone #

E-mail

Signature of Adopter

Date