

COTTONWOOD COUNTY ANIMAL RESCUE

457 15th Street

Windom, Mn. 56101 ADOPTION CONTRACT -- DATE _____

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cottonwoodanimalrescue@gmail.com Breed _____

Pet Name _____ Markings/Color _____

Dogs__Cats__Puppy__Kitten__ Sex: M or F Spayed/Neutered: Yes or No
(if not, a Voucher is given to be used at the Cottonwood County Vet Clinic
no later then six months age) Voucher given: Yes or No

Statement of Adoption: I acknowledge receipt from the Cottonwood County
Animal Rescue of the Animal described above. I accept the animal with the
following understanding:

1. I agree to care for this animal in a responsible, loving manner as a pet
for myself and/or someone I reside with, and will be retained by me.
If a situation should arise where I cannot keep the animal at my home,
I shall not give it to a third party, but must instead return it to CCAR.
I hereby grant the CCAR a priority interest in the animal identified in
this agreement. I further agree that the CCAR can repossess said
animal if is any default in the terms of this agreement. Default shall
occur if the adopter fails to follow any terms of this
agreement _____
2. If at any time I desire to relinquish custody or CCAR demands its
return, **for any reason**, I agree to immediately return the animal to the
CCAR, making no charge of any kind for licensing, care, food,
medical fees, or other services. _____
3. I agree to provide this animal with proper control, housing, food,
water, veterinary care, current identification and loving humane
treatment at all times. **I agree to allow CCAR the right to see the
animal at any time.** _____
4. I agree that I will bring no claim or action against the CCAR, or its
officers for any reason and I accept full legal responsibility for this
animal and its actions. _____
5. The CCAR makes no claim as to the mental or physical condition or
behavior of this animal. I accept all medical responsibility for this
animal's care on and after the date this contact is executed. _____

6. I agree that if I fail to abide by the terms and conditions, I must forfeit this animal to the CCAR.
7. Notice: if adopting a cat and you have other cats you may want to have the cat tested for Feline Leukemia, FIV and/or FIP.
8. I am at least 18 years of age. _____

I have read and signed this contract and agree to be legally bound by its provisions. Failure to abide by these terms can result in the CCAR repossessing the animal, with or without legal process.

Adopter signature

For the CCAR

Adopter Name (please print) _____

Address: _____ City _____

State: _____ Zip: _____ E-Mail: _____

Phone (home): _____ Phone (work) _____

Did you find out about us on Face Book? Yes ___ No ___

Contact Joann-507-831-4110 * Phyllis-507-831-2249 * Pat-507-831-4528.