



**Paws & Claws Humane Society**  
**3224 19<sup>th</sup> Street NW Rochester, MN**  
**55901**

## **Adoption Agreement Information**

Our animals are available on a first come, first serve basis. Please note that an approved application does not necessarily guarantee that a particular animal will be available at a future date/time. An approved application for one animal may not be transferable to the adoption of a different animal.

Please review the following adoption policies. After reading and agreeing, initial in the space to the left of the items.

\_\_\_\_\_ I fully understand and agree that within the first 30 days of adoption I may return the animal to Paws and Claws Humane Society. I will NOT be given a refund.

\_\_\_\_\_ I fully understand and agree that after the initial 30-day period if I want to surrender the animal back to the Humane Society there will be a surrender fee and that the animal will only be accepted back if space allows.

\_\_\_\_\_ I fully understand and agree that any adoption fees paid to the Humane Society will not be refunded.

\_\_\_\_\_ I fully understand and agree that the Paws and Claws Humane Society makes no warranty or guarantees (behavioral or health) regarding this animal.

\_\_\_\_\_ I fully understand and agree that Paws and Claws Humane Society has the right to request a home visit and/or to otherwise see the animal at any time.

\_\_\_\_\_ I fully understand and agree that I will provide humane care and treatment for this animal and abide by all terms and conditions of this agreement.

\_\_\_\_\_ I fully understand and agree that if I have any questions concerning this animal I will contact the Humane Society immediately.

\_\_\_\_\_ I fully understand and agree that Paws and Claws Humane Society has the right to refuse any adoption for any reason.

\_\_\_\_\_ I have considered a plan for if I encounter the following life situations: getting married, moving, getting divorced, having a baby, contracting allergies, getting an additional pet, going on vacation, and medical emergencies for myself or my pet.

\_\_\_\_\_ Pets are relinquished at very high rates, I understand that Paws and Claws is trying to combat this and I know that Paws and Claws' adoption efforts are for a pet's lifetime.

Applicant Signature \_\_\_\_\_

Applicant Printed Name \_\_\_\_\_

Date \_\_\_\_\_ PCHS Staff Initial \_\_\_\_\_