Foster must send in 3 things: This form. Approved application of this adopter. Check made out to Releash Atlanta Send to: Releash Atlanta 2634 Rangewood Court NE Atlanta GA 30345

Adopter Information	Pet Information	
Name:	Pet Name	
Street Address:	Male Female Spayed Neutered	
CityStateZip	Breed:Color:	
Main Contact Number:	Age:	
Email Address: Payment: Cash Check)	Foster Name(Print Legibly) Foster Signature	

Adopter Acknowledgement

Releash Atlanta is not responsible for this dogs temperament, health or behavior and shall not be held liable in any way for any injury, damage, harm or loss this dog causes now or in the future to any person, property or animal. By adopting this dog, you assume all risk associated with its health, temperament, and behavior from this day forward. Your adoption fee is non refundable. If now or in the future you choose to hold Releash Atlanta liable for any harm, damages, loss or injury this dog may cause you are responsible for paying Releash Atlanta's legal fees and litigation costs.

I,			_ agree to the above responsibilities listed by Releash Atlanta on this _	
	(Print Name)			(Day)
of		, in the year of	. Signed:	

Adopter Responsibilities

I, the adopter, agree to the following terms and provisions:

- ✓ From the date of this contract, I agree to assume full responsibility for the veterinary care for this dog, including an annual examination and routine vaccinations and tests. I will keep the dog free of pests and parasites, including ticks and fleas. I understand that dogs require monthly medication for heartworm prevention and agree to provide this medication for the life of the dog ______ *Initials*
- ✓ This dog will be kept on a leash at all times when outside of a securely fenced-in area. _____ *Initials*
- He/she shall not be kept chained or tethered. I will not leave the dog in an electronic containment system unsupervised. I will not allow this dog to live primarily outside, in a basement, garage, screened in porch, or any area other than the main living quarters.
- I will provide a collar for the dog to wear at all times, and a personal tag affixed to the collar at all times. I agree to not permit the dog to ride in the back of a pickup truck unless secured in a carrier.
- I agree to not abuse or neglect the dog and under no circumstances will physically punish the dog. Rather, I will consult with my veterinarian or a trainer about the appropriate ways to deal with specific behavior problems.
- ✓ If for any reason this dog is not spayed or neutered prior to the execution of this contract, I agree to have the appropriate surgical procedure performed on or before ______and to provide documentary proof that this has been performed. N/A ______
- ✓ I understand that the adoption fee is non-refundable.
- ✓ I understand that this is a **legal and binding** contract and by my signature agree to all of the terms herein. _____ **Initials**
- ✓ I acknowledge and understand these special stipulations/concerns relating to this adoption: NA_____
 - (SIGN TO ACKNOWLEDGE) Fear_____ Crate Anxiety_____ Bite History_____
 - o Other

I confirm that all information given in this contract is correct and accurate. I also understand that once the contract is signed and I have taken possession of the animal, I will be solely responsible for any actions of this animal and I agree to hold Releash Atlanta and its representatives from any liabilities, injuries or loss caused by this animal or any causes of actions, claims, suits or demands that arise from such injury, damages or losses. This agreement is made once signed by and between Releash Atlanta and adopter. The adopter hereby understands, promises, and agrees that in receipt of this dog to forever release, discharge and covenant to hold harmless rescuer and by other person, firm, or organization charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors, and assigns from any and all claims, damages, and costs, expenses, loss of services, actions and causes of action belonging to the said adopter, arising out of any act or occurrence from the present time and particularity on account of the adoption of **______ (Dogs Name)**

NAME PRINTED:	NAME SIGNED:	DATE:	

FOR FOSTERS: You MUST send in this form, the approved adoption application of this adopter and a check made out to Releash Atlanta. Once ALL THREE forms are received, your adopter will receive this dogs vet records. Please complete this ASAP as your adopter will need their records! adopt@releashatlanta.com