



A Forever-Home Rescue Foundation

P. O. Box 222801 Chantilly, VA 20153-2801

Phone: 703.961.8690 Fax: 703.814.8543

www.aforeverhome.org

Dog Adoption Contract

Dog's Name: _____ Breed: _____ DOB: _____ AFH Tag #: _____

Sex: _____ Description: _____ Weight: _____

Medical at: _____ Origin: _____

Rabies Tag #: _____ Where Rabies Shot Given: _____ Origin ID: _____

The parties hereto agree that the owners shall abide by the following conditions:

1. _____, Hereinafter referred to as the dog, is being transferred to the adopting owner with the understanding that the adopter is taking possession of the dog to treat and to be responsible for it as their own dog.
2. The dog will be treated as a family member with loving care and affection. I will do my best to ensure the dog's safety and well-being.
3. I/we will feed the dog at least twice a day and will provide a fresh supply of water at all times.
4. The dog will live inside my home and will not be isolated from the family. I will walk my dog on a leash or exercise my dog in a fenced yard, which must be provided unless waived by AFH. I will never let my dog run loose or roam, keep my dog chained or tied up, keep it continuously in a yard, garage, patio, balcony, or pen, or leave my dog outdoors, even in a fenced yard when no one is at home.
5. I will not have the dog attack-trained nor will I use it for any purpose other than companionship. I will not have the dog's ears cropped nor will I have its tail docked. I will never allow any physical, mental, or emotional abuse of the dog
6. I will take the dog to a licensed veterinarian when shots are due _____ but in no event later than one year from the last vet visit. I will provide all required and/or needed veterinary care, including: rabies shots as required every one or three years; yearly booster shots for DHLPPC; yearly fecal checks for internal parasites (worms); and prompt treatment by a licensed veterinarian for any illness or injury.
7. The dog will be given heartworm preventative tablets every month, all year long. I will have a heartworm test given every year. If there is any break in dispensing heartworm tablets, I must retest for heartworm and restart tablets immediately.
8. **The following statement is required by Virginia law: STERILIZATION OF ANY ADOPTED ANIMAL IS REQUIRED BY TITLE 3.2, CHAPTER 65 OF THE CODE OF VIRGINIA. THE ADOPTER AGREES TO ASSUME FULL RESPONSIBILITY FOR COMPLIANCE WITH THE PROVISIONS OF § 3.2-6574 thru § 3.2-6576, WHICH PERTAIN TO THE TIMELY STERILIZATION OF THE ADOPTED PET. A PERSON WHO VIOLATES THESE ARTICLES IS SUBJECT TO CIVIL PENALTY. THE NEW OWNER MAY BE COMPELLED TO COMPLY WITH THE PROVISIONS OF THESE ARTICLE.**
9. If not already done, I will have the dog spayed/neutered by _____ and will immediately forward proof to the AFH office. **Failure to comply with this requirement will result in the immediate return of the dog to AFH.**
10. I/we affirm that no member of my household has been convicted of an animal welfare law violation such as neglect, cruelty, abandonment etc.
11. I will ensure proper licensing of the dog and will attach the appropriate license tags, rabies tag, AFH tag, and personal identification tag to a **non-choke collar to be worn at all times.** I will ensure compliance with all applicable local and state statutes.
12. I will not use a choke-type collar at any time, except for training under the guidance of a qualified dog trainer.
13. I am adopting the dog for myself and I agree to not give away, sell, or trade my dog, even as a gift to a friend or family member. I will neither take the dog to a shelter nor abandon the dog. **I understand that I must notify AFH, without delay, if I can no longer care for or keep my dog** and agree to give AFH reasonable time to rehome my dog or place my dog in an approved foster home, if available. I must notify AFH of any behavioral problems that have occurred at any time before I return my dog and I agree to pay for a professional trainer's evaluation in case of biting or aggression.
14. I agree to accept responsibility and ownership of the dog at my own risk and I release AFH and its agents from any and all liability arising out of possession and ownership of my dog. I agree that I am assuming total financial responsibility for my pet as of the date of this contract. AFH and its agents will not be held responsible for any damages or expenses (veterinary or other) incurred during my ownership of the dog.
15. I agree to take the dog to obedience training classes as a puppy, and/or as an adult.
16. In the event the dog becomes lost or dies, I will immediately notify AFH. I will also immediately notify AFH of any change of contact information (address, phone number, or email address).
17. This dog's known background and medical history have been discussed with me. I understand that AFH has made no representation concerning the health, condition, training, behavior, or temperament of the dog.
18. I agree to permit AFH to make inquiry about and enforce any of the above conditions and requirements at any time after adoption. This can include visits to my home and contact with my veterinarian. **I UNDERSTAND THAT FAILURE TO COMPLY WITH ANY OF THE ABOVE PROVISIONS WILL RESULT IN FORFEITURE OF THE DOG TO AFH.**
19. I understand that by voluntarily signing this agreement, I am entering into a legal and binding contract with A Forever Home Rescue Foundation. Breach of any term(s) of this agreement is deemed actionable by AFH. In the event there is a violation of the agreement, I agree to pay a minimum of \$500.00 in damages. Additionally, in order to facilitate the collection of damages for breach of contract, I waive any challenge to venue and agree that the appropriate venue for this matter is the Commonwealth of Virginia, and the County of Fairfax. Furthermore, I agree to accept service of process by certified mail, return receipt requested, to the address provided in this adoption contract, and specifically waive any right to receive personal service.

Adopter Information:

Name: _____ Driver's License # / State: _____ /

Address: _____ City, State Zip: _____

Phone: (H) _____ (W) _____ (C) _____

E-Mail: _____

Non-refundable Adoption Fee: _____ \$325.00 Donation: _____

Adopter Signature: _____ Date: _____

AFH Rep: _____ Date: _____