

**FOR STAFF USE ONLY**

Date Application Received: \_\_\_\_\_

Animal Name: \_\_\_\_\_ Cat Dog

Adoption Special: \_\_\_\_\_

Adoption Fee Paid: Yes No Amount: \_\_\_\_\_

Date Adoption Finalized: \_\_\_\_\_

**Pre-Adoption Contract**

7649 Industrial Park Road  
 Hornell, NY 14843  
 Phone: 607-324-1270  
 Fax: 607-324-5584  
 hahs1@yahoo.com

Thank you for looking to adopt a pet! We will do our best to find the right animal for your family, but we need your help. Please take a few moments to carefully read through the following and complete the pre-adoption contract and adoption application. **Please read through the below content carefully and INITIAL each line after reading. By INITIALING and signing below you are acknowledging that you have read through each carefully; and fully understand the content.**

\_\_\_\_\_ If you have been charged/convicted of animal abuse or neglect, you may not be considered for adoption.

\_\_\_\_\_ You must provide a copy of your state issued ID.

\_\_\_\_\_ You must be prepared to pay an adoption fee plus the spay/neuter deposit (if applicable). **Adoption fees are non-refundable.**

\_\_\_\_\_ If you rent, please provide a written statement from your landlord or a signed copy of your rent agreement stating that animals are allowed. We also require landlord contact information to obtain verbal consent. **Please note: Landlords have 3 business days to return our call from the day we reach out to them. If we do not hear from your landlord within the allotted time your application will automatically be placed on hold and filed away. We will not be able to move forward with your application until we hear from them, so please be sure to let them know to expect our call.**

\_\_\_\_\_ You must provide the name and telephone number of 3 personal references (no more than 1 relative) that you have known for at least 6 months or longer. In addition, we will need to speak to anyone over the age of 18 currently residing in your household. **Please note: References have 3 business days to return our call from the day we reach out to them. If we do not hear from your references within the allotted time your application will automatically be placed on hold and filed away. We will not be able to move forward with your application until we hear from them, so please be sure to let them know to expect our call.**

\_\_\_\_\_ **ALL** cats and dogs that live in your home are required to be spayed/neutered and up to date with both rabies and distemper vaccines prior to adoption unless a medical reason ordered by a veterinarian prevents it. **Please be sure to contact your veterinarian and give permission to release records to The HAHS so we can confirm your pet(s) vaccination and spay/neuter status.**

\_\_\_\_\_ We receive several applications daily, sometimes multiple applications on any one animal. We try our best to process applications as quickly and efficiently as possible. Please be patient while we process your application as it may take anywhere between 1-7 business days or more depending on the number of applications we receive, and how quickly your personal references, veterinarian, landlord, etc. are able to be reached.

\_\_\_\_\_ Submitting an application does not guarantee that you will be approved for adoption, nor does it guarantee that the animal you are interested in adopting will be placed with your family. We do not honor a first-come, first-serve system, rather we place our animals in the home we feel is the most appropriate fit for both the animal, and the family's needs.

\_\_\_\_\_ Approval for adoption is at the sole discretion of *The Hornell Area Humane Society*. *The HAHS* reserves the right to deny any applicant for adoption for any reason seen fit by *HAHS* representatives.

\_\_\_\_\_ Applications are kept on file and valid for 6 months from the date they have been approved. If there have been any changes since the date of approval, a new application will need to be filled out, and processed.

\_\_\_\_\_ Please understand that *The HAHS* has made every effort to provide an accurate history and assessment of the pet being adopted to the best of our knowledge. *The HAHS* is not able to guarantee the pet's age, breed, medical status, behavior or disposition. Once a shelter animal has been adopted, New York State regulations state that the shelter cannot treat the animal medically. No medications can be dispensed to a new owner for the adopted pet. You must contact your own veterinarian and have your new pet treated at their office.

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

\_\_\_\_\_  
 Date

# Adoption Contract

**PLEASE LEAVE THIS PAGE BLANK. SKIP TO THE NEXT PAGE AND COMPLETE ALL REMAINING PAGES OF THE APPLICATION.**

This contract is made on (adoption date) \_\_\_\_\_ between *The HAHS* and the adopter (full name) \_\_\_\_\_. I, the adopter, understand and agree to the following terms of this contract in order to adopt the pet, further described within this document. I understand that non-compliance with the terms of this agreement gives *The HAHS* the right to reclaim the pet without refund of the adoption fee or other compensation. The contract shall remain in effect for the life of the pet described below.

Name: \_\_\_\_\_ ☐ Male ☐ Female ☐ Spayed ☐ Neutered  
Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Microchip #: \_\_\_\_\_

In accepting this pet I also agree to be bound by the rules and regulations printed below:

1. The right of possession and ownership of the described herein is not absolute, but conditional only, and is subject to termination upon demand if at any time *The HAHS* determines, in its sole discretion that the conditions specified in this agreement have not been fully complied with, the adopter shall return the pet to *The HAHS* upon its demand.
2. The adopter agrees that the pet described above will be kept and cared for in a safe and humane manner, as a family pet and companion. The pet shall be provided with the appropriate food, water, and shelter for the duration of its life.
3. The adopter will take the pet to a licensed veterinarian for regular preventative care at least once per year. The adopter will provide all required and/or needed veterinary care as recommended by the attending veterinarian, including but not limited to: rabies vaccines, distemper vaccines, fecal checks for internal parasites (worms), consistent heartworm preventative and prompt treatment by a licensed veterinarian for any illness or injury for the duration of its life.
4. The adopter will ensure proper licensing of the pet and the adopter will ensure compliance with all applicable local and state requirements. I understand that:
  - A) **By law, all dogs must be licensed within 30 days from the adoption date at your local city, town or village clerk's office. Cats must be licensed in certain municipalities as well. Please check with your municipality for cat licensing laws.**
5. The adopter shall not sell, give, or otherwise transfer the animal described herein to any person without notifying *The HAHS*.
6. *The HAHS* cannot guarantee the pet's age, breed, medical status, behavior or disposition. *The HAHS* its past, present and future officer, directors, agents and employees shall not be held responsible for any defects and/or illness which the animal may have or may develop and for any damage or injury to any person or property which may be caused by the pet. The adopter agrees to release and indemnify and hold harmless *The HAHS*, its past, present and future officers, directors, agents, and employees, including reasonable attorney fees and damages for any damage or injury to any person or property which may be caused by the animal and/or arising out of, and/or in connection with this animal.
7. *The HAHS* will replace an animal adopted **ONLY** under the following circumstances:
  - A) If the animal is returned to *The HAHS* within **five days** from the adoption date **AND** if the cause for such return is an illness that is deemed terminal or chronic.
  - B) The illness must be verified in writing by a licensed veterinarian of the adopter's choice or attested to by the veterinarian of *The HAHS*.
  - C) If the animal dies due to illness within five days from the adoption date, proof of death must be verified in writing by a licensed veterinarian of the adopter's choice or attested to by a veterinarian chosen by *The HAHS*

**\*\* If the loss of the animal is due to the adopter's negligence or accidental death of the animal, the animal will not be replaced.**
8. **Spay/Neuter:** If approved by an *HAHS* representative, the adopter agrees to pay a \$100 deposit and to have the pet spayed/neutered once they reach 6 months of age by their personal veterinarian, and will forward proof of such to *The HAHS* within 14 days of completion. I understand that:
  - A) **Failure to comply with the above time frame requirements will result in the immediate reclaim of the pet by The HAHS, and forfeiture of your deposit.**
9. The adopter will allow *The HAHS* to make inquiry about and enforce any of the above conditions and requirements at any time after adoption as *The HAHS* sees necessary. This includes, but is not limited to visits to the adopter's home, contact with the adopter's veterinarian, etc.
10. Liquidated Damages: Adopter agrees to pay *The HAHS* liquidated damages in the event the terms of this contract are breached. This liquidated damage value is agreed to for the purpose of establishing the value of the animal by a judicial process or other legal means. **Attorney's Fee and Court Costs:** Adopter agrees to pay reasonable attorney fees and court costs in the event this matter is forwarded to an attorney for enforcement.

By signing below, you acknowledge that you have read, understand, and agree to the above adoption contract.

\_\_\_\_\_  
Signature of Adopter

\_\_\_\_\_  
Date

# Adoption Application

When are you planning to adopt: ☐ Immediately ☐ Soon ☐ Just looking  
 Are you looking to adopt a: ☐ Cat/ Kitten ☐ Dog/ Puppy Who are you interested in? \_\_\_\_\_  
 Have you met this animal yet? ☐ Yes ☐ No If so, when and where? \_\_\_\_\_  
 If you are just looking at this time, please let us know the type of animal you wish to adopt in the future.  
**Type:** ☐ Cat ☐ Dog **Gender:** ☐ Male ☐ Female **Breed:** \_\_\_\_\_  
**Age:** ☐ 8 weeks – 1 year ☐ 1 – 3 years ☐ 3 – 7 years ☐ +7 years **Weight limit:** \_\_\_\_\_

## Applicant Information

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 (Please provide your home address below. If attending college and living elsewhere, that address will be asked for later.)  
 Address: \_\_\_\_\_ Apt. / Lot # \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Your Household Information

How long have you lived at the above address? \_\_\_\_\_  
 Do you plan to move in the near future? ☐ Yes ☐ No If so, when? \_\_\_\_\_  
 What type of home do you live in? ☐ House ☐ Apartment ☐ Farm ☐ Mobile Home  
 Do you? (Check all that apply): ☐ Rent your home ☐ Own your home ☐ Rent your land/lot ☐ Own your land/lot  
 If renting, provide your landlord's information. Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Do you live with parents, roommates, spouse, etc.? ☐ Yes ☐ No  
 If you answered yes to the above question, do you have permission from them to have a pet in the home? ☐ Yes ☐ No

**Please list ALL members of your household (please use a separate sheet if necessary)**

Name	Age	Relationship	Phone number	Have they met the animal you're interested in adopting?
				<input type="checkbox"/> Y <input type="checkbox"/> N
				<input type="checkbox"/> Y <input type="checkbox"/> N
				<input type="checkbox"/> Y <input type="checkbox"/> N
				<input type="checkbox"/> Y <input type="checkbox"/> N
				<input type="checkbox"/> Y <input type="checkbox"/> N

If not, can they come in at a later time to meet the animal you are interested in adopting? ☐ Yes ☐ No  
 Do you have children (under 18) who visit regularly? ☐ Yes ☐ No If so, how old? \_\_\_\_\_  
 Is anyone in your household allergic to animals? ☐ Yes ☐ No ☐ Unsure  
 Using the scale below, please rate your household's activity level. (1 being the equivalent of a library and 5 being the equivalent of an amusement park.) ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

## Employment Information

Are you currently: ☐ Employed full time ☐ Employed part time ☐ Unemployed ☐ Retired ☐ Student  
☐ Other, please explain: \_\_\_\_\_  
 Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Hours worked per week? \_\_\_\_\_  
 Who else in your household is employed? \_\_\_\_\_  
 Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Hours worked per week? \_\_\_\_\_  
 If you do not have a form of income, how will you provide for this animal? \_\_\_\_\_  
 Approximately how many hours will this pet be left alone per day? \_\_\_\_\_

## Schooling Information

If you are a student in college, which school do you attend? \_\_\_\_\_  
 Are you currently living in school housing? ☐ Yes ☐ No Address: \_\_\_\_\_  
 Have you started the approval process with the school to have a pet on campus? ☐ Yes ☐ No  
 When will you graduate? \_\_\_\_\_ Where will you live after you graduate? \_\_\_\_\_  
 If moving back home after graduation, do you have permission to bring the pet with you? ☐ Yes ☐ No

## References

Please list three personal references that you have known for at least 6 months or longer. Only **ONE** of your references may be a family member. You may **NOT** use your significant other, roommate, landlord, or veterinarian for your other two references.

Reference #1: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_  
Reference #2: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_  
Family reference: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_

## Pet Information

Have you owned a pet before? (Check all that apply): ☐ I currently have a pet(s) ☐ I have had a pet within the last 5 years ☐ I had a pet more than 5 years ago ☐ I had family pets growing up ☐ Never - this will be my first pet  
☐ There are currently pets in my home, but they do not belong to me (belong to parents, roommates, friends, etc.)  
Have you ever rehomed, sold a pet to another person, or surrendered a pet to a shelter? ☐ Yes ☐ No  
If you have rehomed, sold, or surrendered a pet for any reason please explain why? \_\_\_\_\_

Please list **ALL CATS** living in the household within the last 5 years (past and present)

Name	Age	Spayed/Neutered (Yes or No)?	Indoor, Outdoor or Both	Vaccines Up To Date? (Rabies and Distemper)	Time Owned?	Still Own? (Yes, No, Deceased)
		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> D
		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> D
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		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> D

Please list **ALL DOGS** living in the household within the last 5 years (past and present)

Breed (Lab, Boxer, Pug, etc.)	Name	Age	Spayed/Neutered (Yes or No)?	Indoor, Outdoor or Both	Vaccines Up To Date? (Rabies and Distemper)	Time Owned?	Still Own? (Yes, No, Deceased)
			<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> D
			<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> D
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			<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> D

If any of your pets are not current on vaccines, please explain why. \_\_\_\_\_

If any of your pets are not yet fixed, please explain why. \_\_\_\_\_

Do you have plans to spay/neuter your pets who are not yet done? ☐ Yes ☐ No

If yes, do you have an appointment scheduled? ☐ Yes ☐ No If yes, when and where? \_\_\_\_\_

## Your Veterinary Information

Please list the name(s) of the veterinarian you use for your current pets and past pets within the last 5 years.

Veterinary Clinic Name(s): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**\*Please note: Most veterinarian offices are requiring verbal consent to release records. If you have not yet done so, please be sure to call and give them permission to release records to The Hornell Area Humane Society as we will need access to your pet(s) records in order to process your application.\***

Have you called your vet and given them permission to release records to HAHS? ☐ Yes ☐ No

If this is your first time owning a pet, please list the vet which you plan to use for your new pet.

Veterinary Clinic Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Have you called this vet to confirm they are accepting new clients yet? ☐ Yes ☐ No

If not, please be sure to do so. We will also call them to confirm they are accepting new clients.

1. Why do you want a new pet at this time? (Check all that apply):  
☐ Looking for rodent control ☐ Companion for myself  
☐ Looking for guard dog ☐ Companion for another pet  
☐ Want to breed ☐ My children will learn to be responsible/care for another creature  
☐ Companion/gift for someone else. If so, whom? \_\_\_\_\_ Are they aware of this? ☐ Yes ☐ No  
If not, please provide their phone number. \_\_\_\_\_
2. Who will be primarily responsible for the new pet's care? \_\_\_\_\_
3. Would you adopt an animal that has a treatable medical condition or is considered special needs? ☐ Yes ☐ No
4. Are you committed to providing a permanent home for the lifetime of this new pet, which could be up to 15 years or more? ☐ Yes ☐ No
5. Some pets take longer than others to adjust to their new home. Some may adjust right away. Others may take up to two weeks, or longer to adjust. This may especially be true if other pets are involved. Are you willing to give your new pet the appropriate amount of time to adjust to his/her new home? ☐ Yes ☐ No
6. Where will this pet be primarily living? (Check all that apply): ☐ Indoors only ☐ Outdoors only  
☐ Both indoors/outdoors ☐ Inside with supervised time outside ☐ Basement ☐ Garage  
☐ Other: \_\_\_\_\_
7. If you are looking to adopt a cat, what will you plan to do for your new cat's scratching needs?  
☐ Declaw surgery ☐ Nail clipping ☐ Scratching posts ☐ Not sure yet ☐ Other: \_\_\_\_\_
8. If you are looking to adopt a dog, how do you plan to exercise them? (Check all that apply):  
☐ Daily walks ☐ Short walks ☐ Long walks ☐ Yard exercise ☐ Hiking ☐ Play dates with other dogs  
☐ Fully fenced in yard ☐ Other \_\_\_\_\_
9. Are you prepared to pay for vet bills when your new pet requires medical attention/routine care (vaccines, surgeries, heartworm preventative, deworming medication, flea/tick medication, etc.)? **(\*It is a veterinary recommendation to have your pet examined once a year by a veterinarian, even if they aren't due for vaccines\*)** ☐ Yes ☐ No
10. What is your approximate budget for your new pet's supplies and medical care (food, grooming, vet visits, etc.)?  
\$ \_\_\_\_\_ per month \$ \_\_\_\_\_ in case of emergency
11. Behavior problems can arise for many reasons; most can be solved. Do you agree to seek professional help and assistance to resolve these issues rather than give up your pet should problems occur? ☐ Yes ☐ No
12. What changes in your life/ behaviors from the new pet would cause you to rehome your pet, or return your pet to us or another shelter? (Check all that apply): ☐ Pet is not housebroken ☐ New baby ☐ New job  
☐ Pet becomes aggressive/bites someone ☐ Clawing/chewing furniture ☐ Pet gets too old ☐ Moving  
☐ I become allergic, or ill ☐ Too much responsibility ☐ Lack of time ☐ Pet's behavior  
☐ Conflict between other household pets ☐ Too much energy ☐ Financial issues ☐ None  
☐ Other \_\_\_\_\_
13. If you become incapacitated, move, or cannot take care of your new pet, what will you do with them? Please use the numbers 1 – 6 to indicate the order in which you would do so.  
\_\_\_\_ Make it work \_\_\_\_\_ Contact HAHS to see about surrendering it back  
\_\_\_\_ Rehome with friends/ family \_\_\_\_\_ Surrender to another shelter if HAHS is unable to take it in  
\_\_\_\_ Find it a new and loving home \_\_\_\_\_ Other \_\_\_\_\_

**I hereby certify that the information I provided is true to the best of my knowledge. I give my permission for any of this information to be verified. I understand that filling out this form does not automatically entitle me to adopt an animal, and that I must be approved to adopt by an HAHS representative. I understand that adoptions are based on the best match, thus this application may not necessarily result in the adoption of the animal I am interested in.**

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.