



## MEOW STORIES ADOPTION CONTRACT

EMAIL: MEOWSTORIES@GMAIL.COM / PHONE: 540-270-9141

Date: \_\_\_\_\_ Name & Breed: \_\_\_\_\_ PetSmart Store      Offsite

Please read the following contract in its entirety. This is a legal and binding agreement between the Adopter and Meow Stories. Initial each line to indicate that you have read and understand each bulleted item. If you have any questions or concerns, ask an adoption counselor to clarify the text for you.

*In consideration for adoption of this pet, I represent and agree as follows:*

- I affirm that no member of my household has been convicted of an animal welfare law violation such as neglect, cruelty or, abandonment. I am at least 18 years old and have a legal, verifiable ID. \_\_\_\_/\_\_\_\_ (Initials)
- I affirm that no member of my household has been charged or convicted of a violent crime. \_\_\_\_/\_\_\_\_ (Initials)
- All adult members of my household are aware and have agreed to this adoption. \_\_\_\_/\_\_\_\_ (Initials)
- **“STERILIZATION OF THIS ANIMAL IS REQUIRED UNDER ARTICLE 6.1, SECTION 3.1-796.126:2 OF THE CODE OF VIRGINIA. A PERSON WHO VIOLATES THIS ARTICLE IS SUBJECT TO CIVIL PENALTY. THE NEW OWNER MAY BE COMPELLED TO COMPLY WITH THE PROVISIONS OF THIS ARTICLE.**
  - I understand the cat or kitten being adopted is already spayed or neutered, has received age appropriate vaccinations (if too young for rabies at the time of adoption the rabies vaccination becomes the responsibility of the adopter), and had an initial broad-spectrum deworming and flea preventative. \_\_\_\_/\_\_\_\_ (Initials)
- I will feed my pet cat or kitten food at least twice a day and will provide a continuous supply of water unless otherwise directed by a licensed veterinarian. \_\_\_\_/\_\_\_\_ (Initials)
- I will provide loving care and will treat this animal as an **INDOOR** family house pet for the LIFETIME of this pet. He/she will not be isolated from the rest of the family. I understand this could be a commitment of 20 years or longer. \_\_\_\_/\_\_\_\_ (Initials)
- I will provide annual routine veterinary care, including vaccinations and other services recommended by my vet. **I will NOT have the cat de-clawed.** \_\_\_\_/\_\_\_\_ (Initials)
- If at any time, Meow Stories determines, at its sole discretion, that I have not complied with any term or condition of this contract, or that the pet is not receiving proper or humane care, Meow Stories may take possession of the pet. \_\_\_\_/\_\_\_\_ (Initials)
- If I return the cat within the guidelines of the contract within two weeks of adoption, I can expect a refund of my adoption fee. I am aware that Meow Stories may require a reasonable amount of time to retrieve the animal; a minimum of 72 hours. \_\_\_\_/\_\_\_\_ (Initials)
- I understand that if I can no longer keep or care for or this pet, I am required to return this pet to Meow Stories and based on current capacity I may be required to wait several weeks before intake is possible. In the event the cat is returned to Meow Stories after the two week return period following adoption, the conditions of this contract must have been met and documentation must be provided to Meow Stories showing that annual vaccinations are up to date along with the original vet records provided at the time of adoption. If these are not presented at the time of return a \$75 surrender fee will apply to cover the costs associated with bringing vaccinations up to date and a new combo test. **I agree not to give away, sell or**

**rehome this animal without prior consent from Meow Stories and I agree not to abandon this animal.**

\_\_\_\_/\_\_\_\_ (Initials)

- I understand that this is an adoption contract and not for the sale of this pet. I agree to pay the adoption fee set forth below. The contract and the application submitted to Meow Stories constitute the entire contract for the adoption of this pet. No prior representations or agreements are valid unless incorporated within. \_\_\_\_/\_\_\_\_ (Initials)
- I understand that my failure to comply with any of the above provisions of this contract will result in forfeiture of the adopted animal. \_\_\_\_/\_\_\_\_ (Initials)
- ATTORNEYS FEES AND COURT COSTS: I agree to pay reasonable attorney fees and costs in the event this contract is forwarded by Meow Stories to an attorney for enforcement. \_\_\_\_/\_\_\_\_ (Initials)
- The adopted cat or kitten must leave in a pet carrier to the adopter's home.

**PLEASE READ THE FOLLOWING CAREFULLY AND INITIAL:**

- I understand that Meow Stories cannot make any guarantees on the health of this pet. This cat's known background and medical history have been discussed with me and I have been provided a copy of all know vet records. I understand that Meow Stories has made no promises concerning the health, condition, training, behavior, or temperament of the cat. Accordingly, I will take this cat/kitten to my veterinarian within 14 days of the adoption for a health check-up. \_\_\_\_/\_\_\_\_ (Initials)
- I understand that many illnesses have an incubation period of up to several weeks and these cannot be known in advance of adoption despite the vet care provided prior to adoption. Should my pet become ill during the return period I have the option to return the pet to Meow Stories for a full refund of the adoption fee. I also understand that Meow Stories will not be responsible for vet bills relating to the adopted pet should I choose to keep said pet instead. \_\_\_\_/\_\_\_\_ (Initials)
- I understand that when bringing a new pet into my home I should separate it from existing animals for a period of 10 to 14 days, and I agree if my existing animals are not up to date on vaccines and preventatives Meow Stories will not be liable in the event existing pets in the home become ill. \_\_\_\_/\_\_\_\_ (Initials)
- I hereby agree to accept possession and ownership of this animal at my own risk and hereby release Meow Stories and all of their representatives from any and all liability arising out of possession and ownership of said animal. It is understood that Meow Stories has made no representations concerning the health or condition of the animal involved, and while they will accept the return of the animal, they will not be held responsible for any veterinary expenses incurred while the animal is in our possession, nor for any damage caused by the animal while in our possession or ownership. \_\_\_\_/\_\_\_\_ (Initials)
- Additional Adendum:

Adoption Fee: \_\_\_\_\_ Payment Type (Circle): CASH / SQUARE Received By: \_\_\_\_\_

Adopter Name: \_\_\_\_\_ SSN or Driver's License #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adopter Name: \_\_\_\_\_ SSN or Driver's License #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_