

# KITTY CLAWS RESCUE GROUP SC

## Adoption Contract

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip \_\_\_\_\_

Driver's License or Alternate ID \_\_\_\_\_ State \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ Alternate or Cell \_\_\_\_\_

Own Home: \_\_\_\_\_ Rent: \_\_\_\_\_ Landlord Name/Phone \_\_\_\_\_

\_\_\_\_\_ Please Initial if you rent and have the express permission from your landlord to have pets.

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Children in Home? \_\_\_\_\_ Age of Children: \_\_\_\_\_ Any others pets? \_\_\_\_\_

Name of Veterinarian: \_\_\_\_\_ Phone No: \_\_\_\_\_

Cat/Kitten's Name: \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Breed (Circle One) DLH DSH DMH Color/Markings \_\_\_\_\_

Date Spay/Neuter: \_\_\_\_\_ Approximate DOB/Age \_\_\_\_\_

Date of Vaccinations: Rabies \_\_\_\_\_ 1<sup>st</sup> FVRCP \_\_\_\_\_ 2<sup>nd</sup> FVRCP \_\_\_\_\_ 3<sup>rd</sup> FVRCP \_\_\_\_\_

Location Cat was found \_\_\_\_\_ Fostered by \_\_\_\_\_

\_\_\_\_\_ (Initial) Adoption of this cat is a lifetime commitment and cats can live to be 20 years old. The welfare of this cat is you – the new owner's responsibility. By adopting, you agree to give this cat the care it needs (food, shelter, vet care & love). If for any reason you cannot keep this cat, 'DO NOT' take it to a pound or shelter. Please contact us and if at all possible, we will take the cat back or make arrangements for the cat to be placed in another home.

\_\_\_\_\_ (Initial) All cats have been spayed/neutered, tested for FELV/FIV & had their recommended vaccinations before being adopted. If any vaccinations are due within a month after the adoption, new owner is to contact KCRG. Vaccinations/health care after this time will be the responsibility of the new owner.

\_\_\_\_\_ (Initial) You understand the cat you are adopting is an INDOOR CAT and is to be kept inside your home and not allowed to go outdoors.

\_\_\_\_\_ (Initial) KCRG reserves the right to make home visits to check the status of the cat. If we determine living conditions are not satisfactory or if cat is not properly cared for, the owner is in breach of any of the contract requirement and KCRG will reclaim possession of the cat. All home visits will be scheduled in advance, if at all possible.

Adoption Fee \$ \_\_\_\_\_. Kitty Claws Rescue Group is a non-profit 501( c ) (3) [EIN #84-3204969] all volunteer organization and works through the generosity of the public. Monetary donations help to alleviate some of the costs for the neuter/spay of homeless cats, tests, vaccinations and health checks.

As the new owner, I agree to all of the above terms stated in this adoption form and by KCRG.

Adoptee's signature \_\_\_\_\_ Adoption Date \_\_\_\_\_

Kitty Claws Rescue Group Official's Name \_\_\_\_\_

KCRG Contact Names/Telephone: Betty Genovese (843) 421-4583; Jennifer Muth (702) 371-8335; Donna Sprague (843) 333-5704; Virginia Talley (404) 272-7668; Dee Wagner (843) 902-2651; Sally Wojtowicz (843) 877-0269