



Adoption Application and Agreement

Clermont Pets Alive!

Your Information

First Name: _____

Last Name: _____

Title: -Dr. -Mr. -Mrs. -Ms.

Street 1: _____

Street 2: _____

City: _____

State: _____

Zip: _____

Home/Primary
phone: _____

Work phone: _____

Cell/Backup phone: _____

E-Mail: _____

Best Time to Call: -1 - Mornings -2 - Afternoons -3 - Evenings

How Did You Hear
About Clermont Pets
Alive? _____

Your Household

Residence Type: -Apartment -Condo -House -Mobile Home -Other

Number of Adults: _____

Number of Children: _____

Age of Children: _____

Fenced Yard:

Own or Rent: -Own -Rent/Lease

If You Rent or Lease,
Provide Landlord's
Name and Phone
Number and Indicate
if You Have
Permission to Add a
Pet: _____



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Pet Experience

If you've owned pet(s) in the past, please share details for all animals in your household in the past five (5) years.

List Name, Type,
Age, Sex, if
Spay/Neutered and
Length of Ownership:

Pet Relinquishment

If you've EVER given away or relinquished a pet, please share the details below.

Provide Details Why
Pet Was Given Away
or Relinquished
(Include ALL
Occurrences):

Vet Information

A representative of Clermont Pets Alive! may contact your Veterinarian to confirm the information provided below. By agreeing to release veterinary information you consent to the release of such veterinary information by your Veterinarian to Clermont Pets Alive!.

Agree to Release Veterinary Information: -No -Not applicable -Yes

Pets Current on Vaccinations: -No -Not Applicable -Yes

Pets Spay/Neutered: -No -Not Applicable -Yes

Organization Name:

First Name:

Last Name:

Work phone:

Explain
Medical/Behavioral
Issues for Pets in
Your Home:



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Adoption Details

Specific
Animal/Breed
(Explain):

Anyone in Household Allergic to Cats: -No -Not Applicable -Yes

Plan to Declaw Cat/Kitten: -No -Not Applicable -Yes

Type of Animal Desired: -Cat -Dog -Kitten -Pregnant Cat -Pregnant Dog

Please Share Your
Reason for Adopting
as This Time AND
Attributes You Desire
in Your New Pet:

Communication Preferences

We like to keep Adopters informed of important news, schedules, and opportunities, however we will not send you any anything you prefer not to receive. Use the checkboxes below to select the topics you would like to receive from us.

What kinds of email
would you like to
receive?

- Electronic Newsletters
Scheduled communication sharing accomplishments, providing educational material and news of upcoming events, activities and opportunities.
- Recruitment Appeals
Specific requests for your support.
- Animals for Adoption
Networking requests to place animals into forever homes.
- Account Maintenance
Notifications of items required for you to maintain your access to the Clermont Pets Alive! Volunteer Center.
- Your Feedback
Inquiries requesting your input regarding your experience with Clermont Pets Alive!
- Schedule reminders
Notifications of volunteer events or activities for which you have expressed interest.



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My Approval

I am typing my first and last name in the field below to indicate my acceptance of the terms listed below. This will act as my signature and indicates my agreement to be bound by these terms.

Signature (Type First
and Last Name): _____

Permission to Use
Photos/Video of You:

Are You At Least 18 -No -Yes
Years Old:

Adoption Agreement

- I/We understand that there is a fee for the adoption of each animal, which will vary by age and type of animal. Although the Clermont Pets Alive! adoption fees rarely cover our vetting expenses for the animals, the monies received will help fund the next homeless animal's vetting that needs our assistance.
- I/We Understand That Owning a Pet Is a Long-Term Commitment And That Pets Live 12-15 Years Or Longer.
- I/We Are Willing to Provide Medical Care For Your New Pet When Needed, Including Vaccinations and treatment of Illness and/or Injury And Sufficient Food, Water and Shelter?
- I/We Agree That This Pet Will Not Be Abused in Any Manner.
- I/We Agree to Comply With All Applicable State and Local Laws and Ordinances Related to the Keeping of a Pet, Including Vaccinations?

This pet is presumed to be in healthy condition at the time of adoption. Clermont Pets Alive! will provide medical records to support its medical history. We will not be responsible for any conditions for which clinical symptoms are not evident at the time of adoption.

Adopter recognizes that, although Clermont Pets Alive! has made every possible effort to provide a healthy pet which is compatible with Adopter's home environment, there is no guarantee concerning the temperament or behavior of the pet and Clermont Pets Alive! will not be liable for any pet actions while living with the Adopter, nor for any costs or damages incurred as a result of the pet's conduct.

If I/We are struggling with an issue with this pet or I/We cannot continue to care for this pet, I/We will contact the Clermont Pets Alive! team member that is listed on the Adoption Agreement. If adopting a cat or kitten, I/We agree to read the article "Introducing Cats" to assist in a smooth acclimation into my home.

I hereby certify that all answers and statements are true and correct. I understand that giving a false answer may result in denying an adoption. Clermont Pets Alive! Representative reserves the right to accept or deny any application.

:I Agree

Fax Completed Form to: 877-204-4863

Email Completed Form to: Adoptions@ClermontPetsAlive.org

Mail Completed Form to:

Clermont Pets Alive!
1250 W. Ohio Pike, Suite 201
Amelia, OH 45102

We Request Your Patience to Process Your Application Offline - Thank You.