



Siberians Needing Owners

Siberian Husky Rescue, Education and Referral

"Dedicated to the Care, Understanding, Rehabilitation and Adoption of Siberian Huskies and other sled dogs."

**P.O Box 987
Kettle Falls, WA 99141
(509) 738-2919**

www.siberiansneedingowners.org

ADOPTION AGREEMENT

Pet Name _____	Breed _____	Eye Color _____	Tag# _____
Coat Color _____	DOB or Age _____	Spay/neutered _____	Date of Surgery ___ / ___ / ___
DHLPP ___ / ___ / ___	Rabies ___ / ___ / ___	Worming ___ / ___ / ___	Chip ID# _____

I/we, _____ the undersigned adopting party, understand and agree to the following terms and conditions of this contract in the acquisition of the above dog;

- I To always keep this dog within a secure yard or safely within the home and to provide food, fresh water, adequate exercise, veterinary care and human affection
 - II To comply with all State and Local laws and ordinances that pertain to the keeping of this dog.
 - III To never allow this dog to be trained for or used for guard duty or animal fighting.
 - IV To return the dog to SNO if you are unable to care for the dog.
 - V To never abandon the dog or surrender, sell, or give the dog to a shelter, pet dealer or laboratory. Provide no less than 2 weeks for SNO to make arrangements to reclaim physical custody of the dog.
 - VI To notify SNO of any change in address and/or telephone number.
 - VII To notify SNO immediately if the dog has escaped, is lost, or stolen, and to make all reasonable efforts to locate the dog.
- CONTACT: (805) 461-5203

I/we further understand that:

1. Non-compliance with any of the above terms and conditions may result in the immediate forfeiture of the dog and that a designated SNO representative may reclaim this dog at SNO's discretion, without payment of compensation to me/us. I agree to allow the agent of SNO to remove the dog from any premises occupied by me or otherwise housing the dog and ENTRY SHALL NOT CONSTITUTE A TRESPASS. Initials _____
2. I/we understand that SNO makes no express or implied claims or warranties about the health and soundness of the dog beyond the vaccinations it has received and has been altered, or other medical issues specifically known and addressed by SNO. The adopter understands that she/he is taking the dog "AS-IS." Initials: _____

In consideration of the adoption of this dog, I/we agree to assume full responsibility for the conduct of this dog upon the date of this contract. I/we further agree to hold harmless SNO or any representatives of SNO, and any other individuals associated with the Rescue Program, and to indemnify such organizations or individuals for any damages or costs resulting from liability, known or unknown, anticipated or unanticipated, as a result of the dog's conduct after the date of this adoption contract.

Signed and agree this _____ day of _____ 20_____

Adopters Signature

Print Name

Home Phone

Address (City, State, Zip)

Work Phone

Email

Adoption Donation: \$ _____ Accepted by: _____ On behalf of SNO _____

Please Note: Refunds for returned dogs within 14 days have a reprocessing fee of \$25.00. No refunds after 14 days.