



1920 Indian Wood Circle
Maumee, Ohio 43537
419-891-0705
Toledoareahumanesociety.org

Animal Name: _____ ID#: _____

HOLD: _____
Today's date Emp. initials

_____ Hold until (time) Hold until (date) Amt. paid

TAHS Adoption Application

Welcome to the Toledo Area Humane Society. Thank you for considering adopting a pet from us.

- Please fill out the following application carefully and completely. This information will help us make the best placement possible - our goal is to find a loving, responsible and PERMANENT home for the animals in our care.

To adopt a pet from TAHS:

- Must be 18 years of age and have current identification.
- If you are a renter, we will need to verify that pets are allowed by your landlord (please bring a copy of your lease and landlord contact information)
- Please bring all household members and pets to meet humane society animals prior to adopting.

PLEASE TELL US ABOUT YOUR HOUSEHOLD

Today's date: _____

Name: _____ Birth date: ____/____/____ Over 60? Yes No

Address: _____

City: _____ State: _____ Zip: _____

How long at this address: _____ Own Rent

Home Phone: _____ Work: _____ Cell: _____

E-mail: _____ Driver's License #: _____

Your Household consists of: Adults Only Family with older children (10 years old or older)

Seniors - 60+ Family with young children (younger than 10 years old) Live alone

The activity level in your home is: Quiet Active Hectic

Does any member of your family have allergies to animals? _____

Are you planning to move any time soon? No Yes

If Yes, when do you plan to move? _____

If you move, what will you do with the pet? _____

PLEASE TELL US ABOUT YOUR PET HISTORY

Please check one: First-time pet owner Had pets when growing up Have pets now

Companion animals currently in your household:

Breed/Name	Spayed/Neutered	Kept where	Time owned	Age
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____

Please tell us about your past pets:

Type/Name of animal	Spayed/Neutered	Kept where	Reason you no longer have this pet?
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

Name of your Veterinarian: _____ Phone number: _____

_____ (Initials) I give permission for TAHS to contact my veterinarian to verify care of present/past pets in my home.

PLEASE TELL US ABOUT WHAT TYPE OF PET YOU ARE LOOKING FOR

I am interested in adopting a: Dog Puppy Cat Kitten Other _____

Pet selection preferences:

- Sex: Male/Neutered Female/Spayed No Preference
- Age: Adult Adolescent Young No Preference
- Size (dogs only): Small Medium Large No Preference
- Training Level: Fully Trained Partially trained No Training House Trained
- Activity Level: Very Active Somewhat Active Quiet No Preference

Please note any other desired traits here: _____

Reason for adopting: (Check all that apply) Family companion Companion for other animal
 Guard/Security/Protection Gift Hunting
 Mouser Other _____

Where will you keep your pet? (Please check all that apply)

House Crate/cage Fenced Yard Fenced Run In/outdoor cat
 Garage Patio Chained Other _____

Time at home: Rarely (sleep there only) At home when not at work Home all day (Someone is there)

How many hours per day will your pet spend alone: Weekdays _____ Weekends _____

Do you travel? Yes No

If so, what are your plans for caring for your pet while you are away? _____

Have you ever adopted from the Toledo Area Humane Society? Yes No

List any behavior problems you consider NOT acceptable _____

Have you ever surrendered a pet to a shelter / humane society? Yes No

If yes, please explain the circumstances: _____ When: _____

Are you willing to give your pet at least 6 months to adjust to its new home? Yes No

Will you crate train your new dog? Yes No

❖ You will have some houstraining with your new pet as he/she adjusts to their new home.

Would you like information on how to houstrain your new pet? Yes No

❖ Many rescue animals have unknown medical histories. Are you prepared to provide and pay for any necessary medical treatment that may occur in the future? Yes No

How much do you anticipate spending on veterinary care for this pet per year?

Please circle one: Less than \$100 \$100 - \$250 \$250 - \$500 Over \$500

How much do you anticipate spending on food, litter, treats/toys, grooming, etc. for this pet per month?

Please circle one: Less than \$20 \$20-50 Over \$50



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TAHS Adoption Contract

Dog Cat Pup Kitten Other Breed/Species: _____ Age: _____ Sex: M F
 Animal ID # _____ Animal Name: _____ Adoption fee: _____

Microchip Barcode

The undersigned agrees to adopt the animal described above from the Toledo Area Humane Society (TAHS) and hereby agrees as follows:

1. TAHS takes in abandoned, abused, and neglected animals in addition to owner-surrendered animals and strays. Because of this, we do not always know what these animals were exposed to prior to entering our facility and strongly recommend you consult your veterinarian on appropriate measures to protect your current pet(s) during their introduction to your new pet. TAHS is unable to treat your existing pets if they are exposed to any illnesses by your newly adopted pet(s).

2. TAHS strongly encourages you to have your new pet examined by a veterinarian within 14 days of adoption. If you choose a veterinarian on the list provided by TAHS, the exam is complementary (no cost). This appointment must be made within 14 calendar days of adoption. Please submit your TAHS adoption receipt and health history to the vet office in order for the exam fee to be waived. This complimentary exam does not include medications, vaccines, diagnostics, or treatment beyond the exam itself. If you authorize any treatment or diagnostics, it will be at your own expense. TAHS cannot reimburse you or your veterinarian for any medical expenses you may incur.

3. If your new pet needs medical attention for illnesses or injuries sustained within 14 days of adoption, you can utilize the free physical exam to have your pet examined. If the examining vet determines that the animal's illness or injury may have been contracted prior to adoption and requires prescription medication for this condition, TAHS will provide most medications at no charge. Prescriptions can be called in to TAHS at (419) 891-9028 or faxed to (419) 891-9327 by your veterinarian, and will be available for pick-up at TAHS between 4:30 and 6:00 p.m. - Tuesday through Sunday. If you have questions about veterinary care provided at TAHS, you can reach our veterinary staff at 419-891-9028, or 419-891-0705 – ext. 317. TAHS is open Tuesday through Sunday between the hours of 10 am and 6 pm. While our veterinary staff makes every effort to assess and document the health of your new pet prior to adoption, please understand that TAHS is not a full service veterinary clinic and there may be some conditions which are beyond our ability to diagnose and treat. We do not have the ability to provide hospitalization or medical treatment for adopted animals, even within the first 14 days after adoption. If an animal you have adopted requires hospitalization or intensive medical treatment, your veterinarian can treat the animal at your expense, or you can return ownership of the animal to TAHS. We are available to discuss treatment options with you. TAHS also cannot make any guarantees regarding an animal's age, breed, or health status.

4. As the adopter, you agree to take full responsibility for the future care and well-being of your pet, including all medical bills and decisions.
5. TAHS may examine and make inquiry about adopted animal at anytime. Upon finding that the conditions set forth in this contract have been violated, or if there has been a failure to follow relevant animal ordinances or anti-cruelty laws, the animal may be confiscated by TAHS, its officers or agents.
6. It is the Adopter's responsibility to properly train and socialize this animal to prevent unwanted behavioral issues. If at any time the pet is lost, stolen, injured, or killed, the adopter is to notify TAHS by email or phone. Adopter agrees to have pet licensed in accordance with all relevant laws and ordinances.
7. This newly adopted pet is to be a family companion and adopter agrees to provide a safe home, adequate food, water, proper care, training, exercise, love and attention.
8. If - for whatever reason - the Adopter is unable to keep this pet for its entire life, the Adopter agrees to return the animal to TAHS. The Adopter agrees to not give away, sell, transfer or dispose of the said animal without first consulting TAHS, as TAHS has the right to require the animal be returned. Adopter understands TAHS will not refund the adoption fee if the animal is returned.
9. If the Adopter relocates to a new address or changes phone number(s), TAHS requests that the adopter notify TAHS of new address and number so we can update our files INCLUDING MICROCHIP REGISTRATION.
10. If the Adopter experiences behavioral issues or difficulties with said animal, Adopter will contact TAHS. BEHAVIORAL HELP-LINE phone #: 419-891-0706 TAHS phone #: 419-891-0705, Ext. 303
Email: behavior@toledoareahumanesociety.org
Behavior Modification Information is also available at: toledoareahumanesociety.org

Adopter understands that animals are unpredictable and that TAHS cannot anticipate or insure against unexpected conduct of animals adopted. Adopter acknowledges that TAHS had not made through its agents, volunteers, or employees any warranties regarding the future condition, temperament, or conduct of the animal. Adopter hereby accepts the animal AS IS, assuming all risks and responsibilities associated with ownership of the animal, including zoonotic diseases and bites. Adopter hereby fully and completely releases, indemnifies, and holds harmless TAHS, it's directors, officers, volunteers, agents, and employees from any claim, cause of action or liability of any sort of nature arising out of the adoption, care, ownership, maintenance, or condition of the animal.

In testimony whereof, Adopter and TAHS sign:

Adopter's Signature:

Adopter's Printed Name:

Date: _____

TAHS Representative Signature:

TAHS Representative Printed Name:

Date: _____

TAHS Adoption Contract - page 3 - Office use only

Animal ID # _____

How did adopter hear about this animal? TAHS website Petfinder.com Friend

Adoption event Walk in Radio TV Vet

Other _____

Adoption counselor will discuss:

- Adjustment to new home.
- Housetraining.
- Best choice of toys, chew bones.
- General training, Obedience / Behavior.
- Introduction to existing pet(s).
- Introduction to Children (if applicable).
- Medical/behavioral issues, waivers.

OFFICE USE ONLY: Adoption Counselor - Enter Initials As Task Is Completed

Medical Waiver: Yes No

If Yes, adopter discussed with Vet/Tech. Vet/tech initials _____

Behavior Waiver: Yes No

If Yes, adopter discussed with behaviorist/supervisor Initials _____

Reviewed contract: _____ Discussed Post OP Instructions: _____

Reviewed Medical History: _____ Discussed Obedience Training: _____

Microchip - Filled out and Stored: _____ Gave Veterinarian List: _____

Rabies - Filled out and Stored: _____ Went over all hand-outs: _____
(Signs of illness, de-clawing, bringing home new pet)

Medicine(s) Given (If Applicable): _____

TAHS Representative Printed Name: _____

TAHS Representative Signature: _____ Date: _____