

TINY BUG DOG RESCUE, LLC.
Adopt – Don't Shop!

Susan Finnegan
Owner/Operator
Palm Bay, FL
321-848-8275
TinyBugDogRescue@AOL.com

ADOPTION CONTRACT

I, _____, will take full responsibility of _____.

He/She will be an inside dog at all times and only go outside when supervised by an adult.

****Please fill in address and phone number for contact information****

Full Name: _____
Address: _____
Phone: _____
Email: _____
Facebook ID: _____

****Please initial next to the following****

_____ I will provide him/her with indoor shelter, water, food, exercise and medical needs on a regular basis.

_____ I will have ID tags on my dogs at all times (Not required for small dogs)

_____ I will take full responsibility for any financial needs my new dog may incur, no matter what the cost may be.

_____ He/She will receive heartworm prevention monthly (Nexguard)

_____ He/She will receive flea and tick medicine (Best to use VCA as they have the best prices.)
Covers flea, ticks, worms, heartworms, ear mites and etc.

Next dosage due on: _____

_____ He/She will not be left unattended with young children.

_____ He/She will not be left alone for more than six (6) hours for the first two weeks in his/her new home. The need time to adjust to this change as well.

_____ Home visits may occur, as well as phone calls if we feel there is a need to do so.

_____ Before thinking of returning this pup for obedience reasons, I will take him/her to a trainer for classes.

_____ Should any circumstances or emergencies arise that prevent me from keeping this dog or if I don't adhere to this contract, I must return the dog to Susan Finnegan at Tiny Bug Dog Rescue. This is **NON-NEGOTIABLE!** Under no circumstances is the dog to be brought to an animal shelter, conveyed to another animal rescue, or given to someone else without permission from Tiny Bug Dog Rescue. If an emergency arises, I understand that I will not call animal services, but rather Tiny Bug Dog Rescue who will then place the call to animal services if necessary.

Name of your Vet: _____

Address: _____

Phone: _____

_____ I AGREE THAT I WILL NOT TAKE THIS PET TO A SHELTER FOR DISPOSAL OR ADOPTION, NOR WILL I TURN THIS DOG LOOSE ON THE STREETS TO FEND FOR ITSELF FOR ANY REASON. I WILL CONTACT TINY BUG DOG RESCUE SO THEY MAY PICK UP THE DOG.

_____ I WILL NOT BARTER, SELL, OR GIVE THIS PET TO ANY FACILITY TO BE USED FOR ANY EXPERIMENTATION, RITUAL OR FIGHTING.

Note:

These pets are looking for their forever homes and not as a play thing until you get bored. I am serious in explaining this and every part of this contract to you, so you will understand. If you have any questions, now is the time to ask.

***A onetime NON-REFUNDABLE adoption fee of \$_____, will be given upon arrival of your new family member. Cash or check payable to Tiny Bug Dog Rescue is accepted. This fee is to offset the shots and the medical treatment of another dog coming in as we are a NON-profit organization.

Adoption Parent Signature

Date

Tiny Bug Dog Rescue Representative

Date

THANK YOU VERY MUCH FOR ADOPTING AND SAVING A PRECIOUS LIFE!!

TINY BUG DOG RESCUE, LLC.

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LIABILITY WAIVER

I/We understand that by signing this agreement that I/we are now deemed the owner of the dog
_____.

I/We agree that said dog above will not be used for any illegal purposes and will NEVER be used for fighting or baiting. If this clause is broken, I/we understand that the dog will be immediately confiscated by Tiny Bug Dog Rescue and all law enforcement will be notified as applicable.

Initials

It is understood that Tiny Bug Dog Rescue may examine and make inquires about said dog. We speak for the dog, as the dog cannot speak for itself. If not satisfied with the condition of the dog or the condition s in which it is kept; said dog can and may be removed immediately and placed in a different home, for the protections of the dog. Any Veterinary service needed due to neglect or lack of care, will be the adopters responsibility and monies payable to Tiny Bug Dog Rescue.

Initials

I/we understand that Tiny Bug Dog Rescue cannot guarantee the behavior, exact age, or temperament of the dog sometimes. We only know what information we are given and the dogs are usually placed with a foster to learn if they are good with children, other dogs, and cats. There are no warranties on the dog.

In the event that I/we make any claim, demand, commence or threaten to commence any action, claim, or proceedings against Tiny Bug Dog Rescue, this document may be raised as an estoppels and act as a complete bar for any recovery.

Initials

Venue

This agreement shall be governed by the laws of the State of Florida. Venue shall be in the Brevard County, Orange County, Indian River County, or Volusia county, Florida.

Initials

Severability

In the event that anyone or more of the provisions contained herein shall, for any reason, be held to be invalid, illegal or unenforceable in any respect, such as invalidity, illegality or unenforceability shall not affect any other provisions of the agreement, but this agreement shall be construed as if such invalid, illegal, or unenforceable provisions have never been contained herein, unless the deletion of such provision or provisions would result in such a material change so as to cause completion of the transactions contemplated herein to be unreasonable.

Initials

I/we agree that I/we have read this document in full and understand that it contains a full and final release of any claims which I/we has or may have against Tiny Bug Dog Rescue.

Signature

Date

Print Name

_____ is being adopted from Tiny Bug Dog Rescue and will need
(pet's name)

(Please read and initial items below)

- Additional vaccines _____
- Booster vaccines for those already administered _____
- Ovariohysterectomy (spay) _____
- Castration (neuter) _____
- Laboratory tests such as Heartworm test, fecal test, or pre-surgical lab work _____
- Additional Heartworm and Flea Control Prevention _____ (1st month is supplied by Tiny Bug Dog Rescue at time of adoption)
- Any medical condition that occurs after adoption _____

I, _____ understand that this additional veterinary care
Will be my financial responsibility .

Pet's name _____

Adoption Parent Name and Signature _____

Date _____