



Building successful partnerships for people and animals!

Animal Humane Association of Star Valley

a 501(c)(3) charitable organization

Print, complete and return this to the shelter or download, complete, **save it with a new file name**, and email as an attachment to adoption@luckys.place.

Adoption Agreement Date _____ Tracking# _____ Tag# _____

Animal's Name _____

Dog Cat Age _____ M F Color _____ Breed _____

Adopter's Name _____

Physical Address _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Conditions Of Adoption

I AGREE:

- That I will make a donation to AHA of SV to help with pre-adoption expenses \$ _____
- That all adults (and landlord if renting) in the household are aware of this adoption
- To provide proper and adequate food, water and veterinary care
- To obey local laws regarding rabies and animal control
- I must contact AHA of SV if I cannot keep this animal for any reason. It is not to be advertised on any website, social media, newspaper, or radio. Nor is it to be re-homed via any other person or shelter for any reason. IT IS TO BE RETURNED TO AHA-SV. Contact AHA-SV (307) 883-PETS to make arrangements for it's return. Initial _____
- To allow a representative of AHA of SV to examine the animal and its living conditions at any time.
- That AHA of SV and its representatives are in no way responsible for any damage which the animal may do to another person or property and no attempt will be made to hold AHA of SV and its representatives liable.
- To have a contained area for the dog and NO PERMANENT TIE OUTS (Will NOT CHAIN)
- To never transport the animal in the open bed of a truck uncrated.
- To accept the animal AS IS, and that AHA of SV is in no way responsible for the condition of the animal.
- Give Reference or your Vets name and/or phone number _____
- I have been given a copy of the vet records for this animal: Initial _____

I hereby release Animal Humane Association of Star Valley, Inc. and the individuals involved in rescuing and placing this animal from all liability.

Adopter's Signature _____ Date _____

AHA of SV Foster Caregiver _____ Date _____



Please be aware there may be other applications pending on the same pet and the application that best suits the welfare of the pet will be given priority. You will need to sign this agreement at the time of adoption.

AHA-SV PO Box 654 Thayne, WY 83127 Hotline 307-883-PETS (7387) www.luckys.place