

**Okefenokee Humane Society Adoption Application**

**To be completed by OHS:**

Approved: **Yes or No**

Adoption Date \_\_\_\_\_

Control # \_\_\_\_\_

Veterinarian: \_\_\_\_\_

Spay or Neuter Date: \_\_\_\_\_

Reminder Date: \_\_\_\_\_

**Please complete the following:**

Name \_\_\_\_\_ Other Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Street address \_\_\_\_\_ P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Others in household (include ages of children) \_\_\_\_\_

Length of time at address \_\_\_\_\_  Own  Rent  Live with parents  Military

Housing type:  House  Condo  Apartment  Mobile home

Landlord name \_\_\_\_\_ Landlord phone \_\_\_\_\_ How did you hear about our adoption program?

\_\_\_\_\_ Please list your current veterinarian \_\_\_\_\_ City \_\_\_\_\_

Have you ever adopted an animal before? **Yes No When?** \_\_\_\_\_

**Where from?** \_\_\_\_\_ **Do you have a fenced yard?** \_\_\_\_\_

**Other pets**

**PET EXPERIENCE:**

\_\_\_\_ First Time Owner \_\_\_\_ Have had one or two \_\_\_\_ Knowledgeable & Experienced.

Will your pet have flea control? Yes No Collar, Oral medications, Sprays, Topical, Others

Will your pet get bathed regularly? Yes No Groomer, Self, Both,

Weekly, Monthly, biannually, Only when needed, Never

Will you take pet to the vet when needed? Yes No

Where will your pet sleep? Inside, Outside, Crate, its own bed, Owners bed, floor, porch, dog house, or other \_\_\_\_\_

**Please initial each blank:**

\_\_\_\_ I certify that the information provided on this form is true and correct. I am also financially able to care for this animal.

\_\_\_\_ I understand that proper food and veterinary care will be costly, and I am able to meet these requirements.

\_\_\_\_ I hereby agree to care for the pet in a humane and responsible manner and to provide it with clean and adequate shelter, food, water and veterinary care.

\_\_\_\_ I agree that said pet shall not be allowed to roam freely, and I will abide by city/county laws where applicable.

\_\_\_\_ I agree to the animal will always have a collar with identification on at all times.

\_\_\_\_ I agree that animal will be kept up to date on its vaccinations yearly including rabies.

\_\_\_\_ I understand that in some cases, a home check may be mandatory prior to your adoption.

\_\_\_\_ I understand that if the pet is under 1 Year of age, periodic home visits after adoption may occur to determine whether the pet is being properly taken care of.

\_\_\_\_ I understand that I only have a 3 day return period for veterinary exam.

\_\_\_\_ I further agree that if the pet is not maintained to the standards set forth, then I agree to return the pet back over to O.H.S. or its agents immediately.

\_\_\_\_ I further agree the animal will not be used as a chained guard dog or put on a tether at any time.

\_\_\_\_ I further agree the animal will not be used for research.

\_\_\_\_ **I further agree to have pet spayed/neutered if not already within thirty (30) days or with puppy by the age of 6months. This will be the date of \_\_\_\_\_.** You will be held in violation if you do not comply with this spay/neuter agreement and the animal may be removed.

\_\_\_\_ I understand and agree that the current owner makes no representations or warranties, expressed or implied, about the animal's temperament and is absolved from any liability for future damages or injuries caused by said animal.

\_\_\_\_ I also understand and agree that O.H.S. gives no guarantees, expressed or implied, of the suitability of the animal to the adopter and/or his family.

\_\_\_\_ I understand that any false statements constitute grounds for confiscation and surrender of the animal to **OHS**. I further understand and agree that **OHS** may demand return of the animal for any violation of the terms of the adoption contract and agreement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**THE OKEFENOKEE HUMANE SOCIETY RESERVES THE RIGHT TO REFUSE ANY ADOPTION.**

Date \_\_\_\_\_ Counselor Initials \_\_\_\_\_ Approved \_\_\_\_\_ Denied/Priors Made \_\_\_\_\_ Pending Landlord Approval (date) \_\_\_\_\_ Received (date) \_\_\_\_\_  
Applicant Informed \_\_\_\_\_ Pending Parent Approval (date) \_\_\_\_\_ Received (date) \_\_\_\_\_ Check Impound File \_\_\_\_\_

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**Mandatory Sterilization Written Agreement**

Initial each paragraph:

- \_\_\_\_\_ By entering into this written agreement with the Okefenokee Humane Society, I acknowledge complete understanding of the Title 4 of the Official Code of Georgia Annotated, relating to the sterilization of dogs and cats acquired from public or private animal shelters, and that a copy of the act was provided to me if I so requested.
- \_\_\_\_\_ The Okefenokee Humane Society agrees to present an apparently healthy, animal for adoption, or make known any known defects, habits traits or characteristics they may know about.
- \_\_\_\_\_ The Okefenokee Humane Society will provide a copy of the completed adoption form, along with any registration papers and/or medical reports that may exist on request.
- \_\_\_\_\_ The Okefenokee Humane Society will provide a list of veterinarians willing to perform sterilization.
- \_\_\_\_\_ As the adoptee of the dog(s)/cat(s) described at the end of this form, I will have the animal(s) sterilized within 30 days of the adoption or within 30 days of the animal reaching 6 months of age, but not later than the date set below. I understand that if I do not comply with this agreement, the Okefenokee Humane Society may seize the animal(s), and if that were to happen, I would receive no refund.
- \_\_\_\_\_ I understand that I will be responsible for the fee of the actual sterilization procedure (spay/neuter).
- \_\_\_\_\_ I agree that it will be my responsibility to pay for any additional fees associated with the sterilization procedure, such as extra services or pain medication.
- \_\_\_\_\_ I understand that it will be my responsibility to pay for a rabies vaccination provided by the veterinarian as an extra expense that is a requirement of both Georgia State Law and the Okefenokee Humane Society.
- \_\_\_\_\_ I understand that I must provide proof of said sterilization from a licensed veterinarian within 30 days.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date: \_\_\_\_\_  
We will contact you on the above date  
to set up an appointment with the  
Veterinarian to have your pet  
Neutered/Spayed

OKEFENOKEE HUMANE SOCIETY, INC.  
1501 Blackwell Street  
Waycross, GA, 31501  
Phone 912-283-4214

Date: \_\_\_\_\_  
Vet: \_\_\_\_\_  
Pet Neuter/Spayed on the above date

#### ANIMAL ADOPTION CONTRACT

The Okefenokee Humane Society hopes that you will be satisfied with, and enjoy your new pet. At the same time we are concerned about the welfare of the animal. In order to ensure these objectives, the Okefenokee Humane Society and new owner jointly agree to the following:

A. The Okefenokee Humane Society agrees:

- To transfer legal ownership of the animal to the adopter.
- To provide for the dogs, a bath, dip, 7 or 8 way vaccination, and an intestinal worm treatment.
- To provide for the cats an intestinal worm treatment .
- That for all dogs, puppies, cats and kittens, four (4) months or older will be neutered/spayed before leaving the Okefenokee Humane Society and any animal that is adopted under the age of four (4) months will be surgically altered when it reaches this age.
- To refund all adoption fees if the animal dies during the surgical procedure, or if the animal is lost, stolen injured or killed whilst in the care of the Okefenokee Humane Society.

B. The adopter agrees:

- Not to keep the animal on a leased or rented property where "NO PETS" policy is in force.
- To provide adequate fresh food and water, clean and dry shelter, and exercise.
- To obey all applicable laws governing control and custody of animals, including laws governing the immunization of cats and dogs against rabies.
- If adopting a dog, to never allow the pet to ride in the back of an OPEN, bed pickup-truck without being secured.
- To provide medical care and treatment needed by the animal; this includes at least one yearly medical check-up and vaccinations indicated by your veterinarian and preventative heartworm medication.
- To adopt the animal as a personal pet/companion, not as a gift, not as chained guard dog, and NOT to be used for research.
- The Okefenokee Humane Society may visit my premises to ensure that this agreement is abided with if a reason dictates, i.e.; complaint by neighbor, request of police department, or need of an animal control officer.
- To return the animal to the Okefenokee Humane Society rather than to abandon. If I decide to give the animal away, I agree to give it only to a person who agrees to be bound by this contract.

Species: \_\_\_\_\_ Shelter ID#: \_\_\_\_\_  
Age: \_\_\_\_\_ Color: \_\_\_\_\_ Breed: \_\_\_\_\_  
Sex: \_\_\_\_\_ Adoption Date: \_\_\_\_\_ Further Description: \_\_\_\_\_  
Name of Adopter: \_\_\_\_\_ Address: \_\_\_\_\_  
City & Zip: \_\_\_\_\_  
Telephone #: \_\_\_\_\_

I hereby verify that I am eighteen (18) years of age or older; that I fully understand my obligations as described above and that failure to comply with these obligations will be a breach of contract, which gives the Okefenokee Humane Society the legal right to TERMINATE ANY OWNERSHIP OF THE ANIMAL(S) AND THEREBY THE LEGAL RIGHT TO RECLAIM THE ANIMAL(S) WITHOUT REFUND.

\_\_\_\_\_  
(Signature of New Owner)

\_\_\_\_\_  
(Date of Contract)

\_\_\_\_\_  
(Signature of the Okefenokee Humane Society Rep.)

\_\_\_\_\_  
(Date Signed)

**ATTENTION - ATTENTION - ATTENTION**  
**PLEASE READ THIS WAIVER THOROUGHLY AND SIGN BEFORE ADOPTING A PET**

Anyone adopting a DOG or CAT from the Okefenokee Humane Society needs to understand that, ANY DOG OR CAT CAN HAVE HEARTWORMS.

We recommend that before adopting a Dog or Cat that you as the new adopter take the animal to the Veterinarian of your choice and have it tested for Heartworms and a Basic Exam (AT YOUR EXPENSE). The Humane Society will furnish a Carrier for a cat to be transported to the Vet.

The Okefenokee Humane Society makes sure that every adult Dog receives a 7/8-way vaccination and that every Puppy receives their first puppy vaccination before leaving the shelter. Every Dog, Puppy, Cat or Kitten will also be de-wormed for intestinal parasites.

The Okefenokee Humane Society DOES NOT have the money or equipment to have the animals examined by a veterinarian or tested before they are adopted. We are not Veterinarians and want you to understand this. We try to the best of our knowledge to only adopt out animals that are in good health.

It is the new Adopters responsibility and at the Expense of the new Adopter to pay for any Medical Treatment or Surgery incurred after the Adoption Date.

I have read and understood the above and agree NOT TO HOLD the Okefenokee Humane Society, Inc. responsible or liable for any Medical Treatment, Medical Supplies or Surgeries incurred after the ADOPTION CONTRACT IS SIGNED.

ADOPTER: \_\_\_\_\_

DATE: \_\_\_\_\_