

TANGIPAHOA PARISH ANIMAL SERVICES

PET ADOPTION FORM

TANGIPAHOA PARISH ANIMAL SERVICES **DOES NOT** GUARANTEE THE HEALTH, TEMPERAMENT, BEHAVIOR, OR FUTURE SIZE OF ANY ADOPTED ANIMAL.

Although we screen animals for signs of ill health, behavioral problems, and can make some predictions regarding future size, unforeseen and undetected problems may arise after adoption.

We will always take the animal back, however the adopter is responsible for any fees, including veterinary expenses, incurred after adopting other than those included in the adoption fee.

Exchange for other animals is determined on case-by-case basis.

THE ADOPTION FEE IS NOT REFUNDABLE

ACKNOWLEDGEMENT I hereby acknowledge that have read the above, und	lerstand and accept the terms and conditions.
Signature	 Date

ATTENTION:

ANY OTHER MEDICAL PROBLEM FOUND AT THE VET WHEN THE ANIMAL IS BEING SPAYED OR NEUTERED IS THE RESPONSIBILITY OF THE ADOPTER, **NOT TANGIPAHOA PARISH ANIMAL SERVICES**.

TANGIPAHOA PARISH ANIMAL SERVICES **DOG ADOPTER PROFILE**

Thank you for filling out this form completely. This information helps us to find the best pet for you.

Ю	dopt one of our pets, you MUST:							
	L. Be at least 18 years of age.							
	2. Have current identification showing your age & current address.							
3. Pay an adoption fee of \$80.00 for dogs/puppies. ADOPTION FEES ARE NOT REFUNDABLE. ADOPTED ANIMA BE RETURNED, BUT EXCHANGE FOR ANOTHER ANIMAL IS CONSIDERED ONLY UNDER CERTAIN CONDITION IS NOT AUTOMATIC.								
	4. Understand that Tangipahoa Parish Animal Services has the right to deny any adoption. OUR GOAL IS TO ENSURE THAT THE ADOPTION IS IN THE BEST INTEREST OF THE ANIMAL.							
	5. Understand that the adoption contract you will sign is a legally binding contract, with specific responsibilities and penalties for non-compliance. By signing it, you are giving your legal word that you will comply with the terms of the contract.							
AD	OPTER INFORMATION ————————————————————————————————————							
IAN	E DATE							
STF	EET ADDRESS							
CIT	STATE ZIP							
EVE	IING PHONE DAY CELL							
BA	CKGROUND INFORMATION ————————————————————————————————————							
eme	ing a dog brings with it a lot of responsibility, including annual veterinarian visits, vaccinations, and possible gency care. This is more expensive than many people realize. How much do you have budgeted for the care and feeding r new dog?							
Are	u prepared to assume the financial responsibilities for your new dog?							
l cui	ently own: House Condo Trailer For how long?							
l cui	ently rent: House Condo Trailer Apartment							
Hav	you confirmed with your Landlord that you can have a Pet.							
l cui	ently live with family or friends House Condo Trailer Apartment Campus Housing							
Hav	you confirmed with your family or friends that you can have a Pet. Yes No							

PLEASE LIST THE DOGS THAT YOU CURRENTLY LIVE WITH:

Name	Type/Breed	Spayed/Neutered?	Had how long?	Still own?	If not, why?				
I ALSO CURRENTLY LIVE	: WITU•								
Other Adults		v?	Ages?						
☐ Children									
☐ Cats				Ages? Both					
Other Animals					•				
_									
LIFE AT YOUR	HOME —								
		12							
How would you describ Quiet/Serene			e	Active					
How do you plan to exe			c						
	Fenced Yard	Jogging							
Where will your new do	og live?								
☐ Both Indoors & Outd	oors Most	ly Indoors Mos	tly Outdoors 🔲 II	n a Fenced Ya	ard				
On a Runner Outside	e 🔲 On a Cab	le Outside 🔲 In a	Dog Pen						
Doing a typical day, wh	en left alone, wh	ere will your new dog	g be kept?						
How many hours a day will your dog be left alone? Where will your dog sleep at night?									
In a shelter environme your house, will you be	-	_	a dog is housebroken Yes No	. If your dog	will be allowed inside				
What kind of house-tra	ining would you I	oe willing to try if acc	idents continue after	the first we	ek?				
☐ Paper ☐ Crate ☐ Take out more often ☐ Use dog door ☐ Rub dog's nose in it & spank the dog ☐ None									
Is your yard fenced? Yes No What type of fence?									
How high is your fence	?		Dimensions:						

YOUR NEW DOG: OTHER TRAITS							
What Type of Dog Do You Imagine Yourself Adopting?							
Quiet & Calm Moderately Active Active & Busy Lots of Energy							
What Role Would You Like Your New Dog to Play in Your Life (check all that apply)?							
Companion/Family Pet Children's Playmate Gaurd Dog Working (herding, hunting)							
Other:							
other:	_						
STERILIZATION PROVISIONS ————————————————————————————————————							
By adopting an animal from TPAS and signing the Adoption & Sterilization Contract, you agree to have the animal spayed							
or neutered on or before the contract date specified as "Expiration Date." Extension or voiding of the "Expiration Date"							
are granted IF AND ONLY IF a veterinary medical reason exists which necessitates an extension or voiding. Such							
a reason must be rendered by a licensed veterinarian and conveyed to Tangipahoa Parish Animal Services. If the animal is a fertile adult female, it may be pregnant – pregnancy alone does not extend the expiration time stated on the							
Adoption & Sterilization Contract. In absence of other extenuating circumstances, the participating veterinarian will spay							
the animal by the time specified. If the animal is too young to be spayed at the time of adoption and becomes pregnant in							
the interim period, the animal must still be spayed in accordance with the Adoption & Sterilization Contract. The Adoption							
& Sterilization Contract is a legally binding document in accordance with Louisiana Revised Statute 3:2472, which							
mandates sterilization for all animals adopted from shelters.							
I certify that I have read and that I understand the information above. I certify that information provided by me is true and I understand that false information may result in the nullification of this adoption. TPAS reserves the							
right to refuse an adoption. This completed application is the property of Tangipahoa Parish Animal Services.							
Adopter's Signature							
naspter a digital and							
Adopter's Printed Name							
TPAS STAFF USE ONLY							
Staff Member Who Handled Adoption							
Staff Comments:							