

APA Adoption Application and Agreement

ACTion Programs for Animals Adoption Center, 537 N. Solano, Dr., Las Cruces, NM, 88001; Open Tues/Wed/Thurs/Sat 11 to 3; Phone: 575-571-4654; Info line: 575-644-0505; E-mail: mail@apalascruces.org; and Website: www.apalascruces.org

First of all, THANK YOU for adopting!

Your Information	· ·	7 7	
Name:		Date:	
Address (incl. city/st./zip):			
Phone #1:			
Email:			
Are your current pets up-to-da	te on vaccines?	Are they spayed/neutered?	
What happened to the last pets	you owned prior to	o these?	
List your household members	and ages:		
Are any household members a	llergic to animals?		
Where in your home do your p	ets reside?		
Do you own or rent your home	?		
If you rent, what is the pet poli	cy?		
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APA name of adopted animal:	Brie	ief description of animal:	
Microchip number:			P. 1
Verified Identity of Adopter (DL, etc.): [Last updated: June 2022	Adoption Fee:	Payment Type:	



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Name of adopted animal:__

Only answer the questions that apply to the type of animal(s) you are adopting:

Cat Questions:	Dog Questions:	
1. Cats/kittens can take a while to adapt to a new home and need time and patience to do soscared ones even more so. What is your plan when you get your feline home to ease the process?	Dogs can take a while to adapt to a new home and need time and patience to do soscared ones even more so. What is your plan when you get your dog home to ease the process?	
2. Can you handle the normal expenses of caring for a cat throughout their lifetime? Provide examples of expenses you can expect:	2. Can you handle the normal expenses of caring for a dog throughout their lifetime? Provide examples of expenses you can expect:	
3. Do you plan to declaw your adopted cat and why? Are you familiar with the procedure?	3. How many hours will the dog be left alone at a time?	
4. What will you do with your cat if you move?	4. Do you know how to humanely/effectively housetrain a dog?5. Are you planning to take your dog to the dog park?	
5. Do you plan to allow your kitten/cat outdoors? Under what circumstances?	6. Are you interested and willing to accept the dog trainer support we can offer?	
Additional Comments?		



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Name of adopted animal:___

Adoption Agreement (this is a legally binding, enforceable contract under civil law):

Please initial each condition of this agreement:
I am 18 years of age or older and have provided identification showing my present address. I own my home or have landlord consent to adopt this animal.
I agree to provide this animal with adequate food and fresh water, shelter from the elements, daily exercise, and kind treatment at all times.
I understand that APA does not guarantee the breed, health, temperament, or training of this animal. I agree to accept responsibility for and ownership of this animal at my sole risk, and I release APA from any and all liability arising out of possession or ownership of this animal.
I agree not to give away, sell, or trade this animal, nor will I take this animal to a shelter or otherwise abandon it. I agree to contact APA immediately if I can no longer care for or keep this animal and further agree to permit APA to take the animal back into its care at such time.
I agree to obey all animal ordinances/regulations governing the area in which I live.
I agree to provide the animal with all recommended veterinary care, including monthly heartworm prevention for dogs and annual vaccinations. I further agree to provide the animal with prompt veterinary care if it becomes ill or injured. I will not euthanize this animal except in the case of the animal's terminal illness, injury, or old age accompanied by pain and suffering. I agree that all veterinary expenses incurred after I adopt this animal are my responsibility and that I will not be reimbursed by APA for any such expenses.
I have been provided and read the medical and/or behavioral records for this animal. If this animal displays behavior problems, I agree to seek assistance from APA or another qualified trainer or behaviorist.
I understand that failure to abide by the adoption policies listed herein shall permit APA to take possession of the adopted animal and revoke this adoption contract.
If this pet is on medications, I understand I need to finish dispensing the medications as directed by APA. I can contact APA to address any concerns with the medications. All medications dispensed have been approved by a licensed veterinarian in the State of New Mexico.
I will inform APA if I have a change in address, phone number, or if I lose my adopted animal so I can get their full support and assistance recovering the animal.
The Following Existing Behavioral and Medical Issues Have Been Explained to Me:
Medical:
APA agrees to cover ONLY the following pre-existing medical condition(s) for this adopted animal for the remainder of its life:
Behavior:
Adopter Signature: Date:
APA Approval: Date:
(printed name) (signature)