



City of Castroville Animal Control  
**PET ADOPTION AGREEMENT**  
1209 Fiorella Street, Castroville, TX 78009  
(830)931-4090

Fee paid: Check/Cash  
Check # \_\_\_\_\_  
Date: \_\_\_\_\_  
Initials: \_\_\_\_\_

**ADOPTER'S INFORMATION:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Phone #: \_\_\_\_\_

Vet Reference Checked: Y/N

**INFORMATION ABOUT ADOPTED ANIMAL:**

Type of Animal: \_\_\_\_\_

Name of Animal: \_\_\_\_\_

Description of Animal: \_\_\_\_\_

Adoption Fee (non-refundable): \$50 minimum donation (payable to Friends of Castroville Animal Control). *This adoption fee offsets the cost of vaccinations, veterinarian exam, spay/neuter, and/or medications as applicable.*

**ADOPTER'S AGREEMENT**

- I understand that the animal being adopted is a "rescued" animal and City of Castroville Animal Control cannot make any guarantees about the animal's previous care, treatment or history. \_\_\_\_\_ (initial)
- I understand and agree that while City of Castroville Animal Control makes every effort to place only healthy and sound animals, City of Castroville Animal Control cannot guarantee the health of any animal. City of Castroville Animal Control shall not be held responsible for any medical expense which may be incurred, hereby expressly excluding any implied or express warranties, merchantability, or fitness for any particular purpose, including without limitation and warranties regarding health, temperament or whether the animal is housebroken. \_\_\_\_\_ (initial)
- I agree that the animal is being adopted for myself and will not be sold, adopted, or given to another party. \_\_\_\_\_ (initial)

- I agree that the animal will not be allowed outdoors without proper supervision. When taking my dog outdoors outside of a fence, they will be on a secure harness and wear proper ID. \_\_\_\_\_ (initial)
- I agree to care for the animal in a humane manner and be a responsible animal guardian. This includes supplying adequate food, water, shelter, attention, and medical care. \_\_\_\_\_ (initial)
- I understand and agree that City of Castroville Animal Control makes no guarantees about the animal's health and is not responsible for any future medical costs incurred by the animal. The dog/cat is adopted "as is" and the adopter assumes all responsibility for the treatment of all existing conditions or any other conditions or physical changes that may occur. \_\_\_\_\_ (initial)
- I understand and agree that City of Castroville Animal Control makes no guarantees about the animal's temperament and is not responsible for future damages or injuries caused by the animal. The dog/cat is adopted "as is" and the adopter assumes all responsibility for any existing or future temperament changes that may occur. \_\_\_\_\_ (initial)
- I understand and agree that City of Castroville Animal Control makes no guarantees about the animal's breed or breed mix. All information provided by City of Castroville Animal Control regarding an animal's breed type is a best guess and has not been confirmed. \_\_\_\_\_ (initial)
- I give City of Castroville Animal Control permission to call at a reasonable time to assure that the animal is being cared for and treated properly. \_\_\_\_\_ (initial)
- I agree to keep City of Castroville Animal Control informed of my current home address and phone number. \_\_\_\_\_ (initial)
- I agree to keep the animal up-to-date on all vaccinations and to give the animal monthly heartworm preventative and flea/tick preventative. \_\_\_\_\_ (initial)
- I agree that the animal must be spayed/neutered by 6 months of age if it has not already been altered and that I must provide veterinary proof of the surgery to City of Castroville Animal Control once it's been completed. \_\_\_\_\_ (initial)
- City of Castroville Animal Control does not refund adoption fees if the dog/cat is returned. \_\_\_\_\_ (initial)
- City of Castroville Animal Control verifies this animal has been vaccinated for rabies in accordance with Texas laws and regulations. I have received the original rabies vaccination certificate for this animal. \_\_\_\_\_ (initial)

This is a legally binding contract.

I agree that all statements I have made on this form are true.

Adopter's Name (print): \_\_\_\_\_

Adopter's Signature: \_\_\_\_\_

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