



**CITY OF LANCASTER
ANIMAL SHELTER
690 E. MAIN ST., LANCASTER, TEXAS 75146
(972) 218-1210 - FAX (972) 227-7220**



PET ADOPTION AGREEMENT

A copy of a valid Texas Driver's License is required.

Name _____ Address _____

Phone _____ D. L. # _____ DOB: _____

Email: _____

Type of animal _____ Breed _____ Color _____

Pattern _____ Age of animal _____ Sex _____

Date due for sterilization: _____

I understand that Texas Chapter 828 of the Health and Safety Code mandates that the animal adopted will require sterilization as a condition of adoption.

Any adult animal adopted is to be sterilized within 30 days after adoption.

Male animals under the age of 8 months are required to be sterilized within 30 days of turning 8 months old. Female animals under the age of 6 months will be required to be sterilized within 30 days of turning 6 months old.

I understand any violation of this agreement is a **CLASS C MISDEMEANOR**. The adoptee will be responsible for all medical bills. The adoptee must return or fax proof of sterilization within 7 days after the sterilization due date.

Prior to the release of any animal, the adoptee must provide a pre-paid invoice from a veterinarian clinic for the rabies immunization. Attached to this form.

Please read carefully and initial each paragraph.

____ I understand that The City of Lancaster Animal Services can not and does not guarantee the health, temperament, or soundness of any animal. Animals are adopted "AS IS". Pets may appear to be healthy upon adoption, but develop symptoms at a later date.

_____ I understand that the City of Lancaster or its employee's are not responsible or liable for any expenditures incurred by the adoptee or any criminal or civil charges which may result as a result of the adopter's ownership of the animal. The adoption agreement does not constitute any warranty or guarantee between the parties; either expressed or implied. I understand that refunds are not given.

____ I agree not to sell, trade, or give away said animal. Should I need to relinquish my pet, I will return the animal to the City of Lancaster Animal Services and pay all appropriated relinquishing fees. Violations of this will result in the Adoptee be banned from further adoptions at the Animal Shelter.

_____ I agree to maintain vaccinations and rabies shots annually and register my pet with Animal Services in my area.

_____ I agree to comply with all state, county and city laws or ordinances pertaining to the health and safety of my animal. I understand that:

- Animals require an adjustment period in their new home.
- The animal's behavior may change once it leaves the shelter and enters an unfamiliar area. Animals should be supervised with children.

I hereby accept possession of and sole responsibility for the above animal. I discharge and release the City of Lancaster, staff and affiliates from liability, damages or injury to any person or property caused by said animal. I have read and fully understand the above conditions for adopting the described animal, and will abide by the adoption agreement. I confirm that all the information provided in the agreement is correct and complete to the best of my knowledge and agree to all terms as stated.

Signed - Adoptee

Date _____

City of Lancaster Animal Services

Date: _____