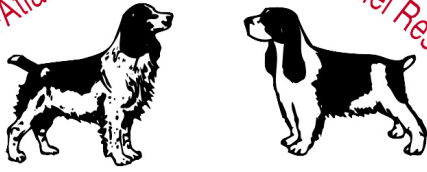


# MAESSR

Mid-Atlantic English Springer Spaniel Rescue



[www.maessr.org](http://www.maessr.org)

## Mid-Atlantic English Springer Spaniel Rescue Adoption Contract

Date \_\_\_\_\_ Adopter(s) Name \_\_\_\_\_

Springer Name \_\_\_\_\_ Number \_\_\_\_\_

I/we understand and agree that a primary purpose of Mid-Atlantic English Springer Spaniel Rescue (herein called MAESSR) is to place Springers in permanent homes where they will receive good and humane treatment. I/we agree that I/we have received the Springer described below under and subject to the terms and conditions of this agreement.

Adopter(s) Initials \_\_\_\_\_

- \_\_\_\_\_ 1. I/we agree to provide food, shelter, water, veterinary care, and humane treatment at all times. Regular veterinary care includes, but is not limited to annual vaccines, year round heartworm preventative, and emergency care to maintain optimum health and comfort. MAESSR recommends Interceptor as the optimum heartworm preventative as it also protects against other parasites.
- \_\_\_\_\_ 2. I/we agree that the dog will be kept as a house pet and companion, and that it will not be tied outside or confined to my premises without access to weatherproof shelter. Nor will it be tied outside or confined for extended periods of time or when no human is home to supervise. Under no circumstances will the dog be trained as a guard or attack dog. I/we agree that invisible fencing is not acceptable unsupervised confinement.
- \_\_\_\_\_ 3. I/we understand that this adoption contract is NONTRANSFERABLE and that the dog may not be sold, given away or abandoned. The animal must be returned to MAESSR if I/we find myself unable or unwilling to comply with this contract and I/we no longer desire this dog. There will be NO REFUNDS of adoption fees **for any reason..**
- \_\_\_\_\_ 4. I/we understand that MAESSR makes no representation, warranty, or guarantee as to the health or disposition of any dog because MAESSR is uncertain of its background. I/we understand that MAESSR has administered the vaccines listed, I/we also understand that the dog has displayed no evidence of illness or health problems during its stay with MAESSR except as disclosed in the **Comments** section below. MAESSR makes no representation, guarantee, or warranty that the dog does not bite.
- \_\_\_\_\_ 5. I/we agree to abide by all state and municipal animal control and licensing laws and to provide an appropriate collar with identification.
- \_\_\_\_\_ 6. My adopted Springer has been microchipped prior to adoption, I/we agree to maintain up to date contact information with the registry service.
- \_\_\_\_\_ 7. I/we agree to notify MAESSR immediately if the adopted dog becomes lost or stolen, and to contact SPCAs, shelters, animal control, and veterinary offices within a 60-mile radius of my home.
- \_\_\_\_\_ 8. I/we understand that MAESSR reserves the right to make one or more in-home inspections at any time after the date of this agreement for any reason.
- \_\_\_\_\_ 9. If at any time conditions are deemed unsatisfactory by MAESSR, or if any conditions or requirements of this agreement are not met, I/we agree to forfeit ownership of the dog, and upon demand, to return the dog to MAESSR.
- \_\_\_\_\_ 10. I/we agree that if I/we breach any condition of this agreement after the date of this agreement I/we shall forfeit ownership of the dog and, upon demand, I/we will return the dog to MAESSR.
- \_\_\_\_\_ 11. If the dog is under 6 months of age when adopted, I/we agree to enroll him/her in a puppy kindergarten or other puppy socialization class before the puppy is 6 months of age.
- \_\_\_\_\_ 12. If the dog is under 1 year of age when adopted, I/we agree to enroll him/her in a basic obedience course

within 60 days of adoption or 60 days of completion of a puppy kindergarten or other puppy socialization class.

13. MAESSR strongly recommends that all adoptive families enroll their dogs in a basic obedience class within 60 days of adoption.

14. I/we agree that no claim, demand, action, suit in law or in equity will be brought by me against MAESSR, its agents or officers by reason of this adoption and I/we hereby generally release this organization, its officers, or agents from any and all actions, suits, claims and demands arising from this adoption.

15. Liquidated damages: I/we agree in addition to the return of the dog provided for above, to pay MAESSR the sum of \$500.00 as liquidated damages in the event the terms of this contract are breached by me/us. This liquidated damage value is agreed to for the purpose of establishing value, and shall not bar MAESSR from seeking return of the dog by judicial process or other legal means, if necessary.

15. I/we certify that the information given to MAESSR in my/our adoption contract and application is truthful and accurate, and that if I/we provide false or misleading information it will be considered a breach of this contract.

16. I/we understand that:  
Dogs are different from human beings in their response to human actions;  
The actions of dogs are often unpredictable;  
Dogs should be closely supervised when they are with children; and accordingly,  
I/we will closely monitor my new Springer as I/we introduce him/her to new situations, people, animals, and environments.

I/we have read all of the above and agree to be legally bound to the terms and conditions stated. I/we have received an exact copy of this agreement.

ADOPTER(s): Please print. This information will be used to return your dog to you if lost or stolen.

Name(s): \_\_\_\_\_

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

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

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

MAESSR Volunteer: Please print the following information on the adoptive Springer.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Color: \_\_\_\_\_

Microchip Number: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Adoption Fee \_\_\_\_\_

Adopter Signature: \_\_\_\_\_

Donations \_\_\_\_\_

Adopter Signature: \_\_\_\_\_

Miscellaneous \_\_\_\_\_

MAESSR Officer signature: \_\_\_\_\_

Total \_\_\_\_\_