

PUG RESCUE ADOPTION AGREEMENT
www.pugbcrescue.com

This agreement must be completed IN FULL / IN DUPLICATE before the new owner takes custody of the Pug
A copy to the adoptive owner(s) / a copy to the Club

PDCBC POLICY IS THAT THE RESCUE PUG MUST BE PAID FOR IN ADVANCE AT THE TIME OF ADOPTION. WE TAKE ONLY CASH OR MONEY ORDER. SORRY, NO ACCEPTIONS.

The Pug Dog Club of BC is a non-profit organization. We operate the PUG RESCUE project on a non-profit basis, in order to ensure that Pugs are well cared for and have loving homes.

PUG DOG CLUB OF BC RESCUE rescues/adopts PUGS which no longer have homes. These Pugs come from families who surrender their Pugs to the program because they can no longer care for them, from the SPCA, from city pounds, and from other situations all over Western Canada

Donations are greatly appreciated to defray medical and other costs associated with caring for the Pug while in our custody and to assist in adopting other pugs in institutions.

ADOPTING OWNER INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____

PROVINCE: _____

POSTAL CODE: _____

/

PHONE: () -

FAX: () -

EMAIL: _____

@

DOG INFORMATION

FILLED OUT BY PDCBC

(The information about this pug is directly relayed by the former owners. the PDCBC therefore absolves itself of any responsibility as to whether or not this information is correct.)

BREED: _____ AGE (or Date of Birth if possible): DAY _____ MONTH _____ YEAR _____

SEX: _____

COLOUR: _____

NAME OF DOG: _____

HEALTH INFORMATION REVEALED ABOUT THIS PUG

(The information about this pug is directly relayed by the former owners. the PDCBC therefore absolves itself of any responsibility as to whether or not this information is correct.)

DATE OF LAST VACCINATION: DAY _____ MONTH _____ YEAR _____

This dog is being released by the Pug Dog Club of BC .on _____(day) _____ (month)_____ (year) , for the following reason(s) give the adoptive owners:

This pug was seen by a PDCBC Veterinarian on _____(day) _____ (month)_____ (year) . This examination revealed the following health information :

(see reverse)

TERMS OF RELEASE

I hereby acknowledge the following terms and conditions for releasing this dog into our/my custody, in order that it may be placed in a desirable home, and;

I the undersigned agree to take ownership and possession of the dog only on the following conditions:

1. Under no condition will the undersigned learn the true identity of the former owner of the dog, nor will the person who gave up possession of the above identified dog learn the true identity of the undersigned;

The undersigned agrees to pay the PDCBC any expenses for veterinary, food, or any other reasonable maintenance expenses while the dog has been in its care, before the adoption is finalized. Please note: ***The PDCBC will not be responsible for the cleaning or extraction of teeth;***

2. The PDCBC is released from any blame or liability should this dog suffer unexpected, early or sudden death after the adoption;

3. The Club will not be held responsible for expenses incurred following the placement of this dog for any reason, without previous written consent;

4. The undersigned will contact the Club without undue delay if the dog becomes lost or stolen;

5. The undersigned will notify the Club of any changes of address, in writing;

6. The undersigned new owner will contact the Club if it becomes necessary to transfer ownership or possession of the dog, and will return same along with a signed release form, so that a new home can be found for it, unless otherwise agreed.

In these circumstances, the Club will be under no obligation to refund the moneys referred to in clause 2, except in extenuating circumstances. The decision as to whether extenuating circumstances exist, and whether the moneys will be refunded in part or in whole, shall be at the discretion of the PDCBC;

8. The undersigned agrees not to euthanize this dog without first obtaining the written consent of the Club. In the case of an emergency involving undue pain and hardship to the dog, euthanasia is authorized under the advise and direction of a professional

Veterinarian, and the undersigned agrees to provide a letter from the Veterinarian in attendance certifying the euthanasia was in the

best interest of the dog.

9. The undersigned agrees to meet and maintain the dog's basic needs, including:

- i. maintaining the dog free of fleas or mites;
- ii. providing all vaccinations and treatments (including heartworm medication) needed to prevent any contagious diseases, and *forwarding a copy of same to the club yearly;*
- iii. maintaining the dog at a proper weight so that its health is not endangered;
- iv. properly caring for eyes, ears, teeth, nails, and general health and well being.

10. The undersigned agrees not to let this dog roam unattended or take it off leash on the streets at any time. The undersigned will keep the dog in a fenced area when it is not supervised;

11. If applicable, the undersigned agrees to spay or neuter the dog within for months of the date of this agreement;

12. The PDCBC has taken this dog to it's own Doctor Of Veterinarian Medicine for a full check prior to the transfer of ownership. Any extra veterinarian care discovered by the undersigned's veterinarian that is not revealed on the prior page must be born by undersigned, should they elect to the treatments prescribed by their Veterinarian.

I/we hereby declare that I/we the undersigned agree to uphold all of the stipulations of above for the pug we are adopting whose particulars are on the reverse side of this document.

This is your official receipt from the PDCBC.

PDCBC Representative duplicate on both forms please. (one for club-one for adopting owner)

Unless otherwise discussed, the basic price of all rescue pugs is \$500.00 (**cash or money order only**). The price to you of this pug is \$_____ (** minus any amount the Club has taken of \$_____ if any, so that the health problem discovered by our Veterinarian can be treated by you.**) Therefore, on this date you pay \$_____.

ADOPTING OWNER RECEIPT

Date: _____

NAME: _____ / _____

ADDRESS: _____ CITY: _____

PROVINCE: _____ POSTAL CODE: _____ / _____ PHONE: () - _____

FAX: () - _____ EMAIL: _____ @ _____

_____ / _____

Signature of adopting owner (s)

Signature of Club Representative

Address: _____ phone _____