

MidAmerica Boston Terrier Rescue (MABTR)
ADOPTION CONTRACT

I, the ADOPTER, agree to:

1. **Not sell, abandon, or give the dog away to anyone. If the owner can no longer keep the dog, MABTR must be contacted and the dog returned to MABTR only.**
2. **Obtain prior approval from MABTR of any expenses MABTR is expected to pay during the trial period.**
3. Provide clean and sufficient food, water, shelter, medical care* and kind treatment for the dog at all times.
4. Have the dog immunized (rabies and distemper/DHPP shots) and examined ANNUALLY, at the owner's expense.
5. Keep the dog current on heartworm preventative and use approved flea/tick control as needed.
6. License the dog in the city/town in which the ADOPTER resides. Rabies certificate provided in the adoption folder.
7. Inform MABTR of any address and/or telephone change in the event of a move in order to keep our records current.
8. Keep means of identification on the dog at all times which includes phone number, dog's name and microchip #.
9. Contact MABTR immediately for assistance and/or counseling if any behavior problem(s) should arise.
10. Not permit the dog to run at large or be a public nuisance. **Keep the dog on a leash when outside of a fenced area.**
11. **Notify MABTR immediately if the dog is lost, stolen, or dies.** Immediately retrieve the dog from any animal shelter when notified the dog is being held at such a location.
12. Provide suitable confinement for the dog inside of the home such as a crate when the ADOPTOR is not present.
13. **Do not leave the dog outside for any length of time while you are away from home.** This breed is not an outdoor dog.
14. Arrange for suitable care if the owner will be on a prolonged absence from the home.
15. Assert no claim, charge or demand of any kind against MidAmerica Boston Terrier Rescue or its agents for any expenses that have been incurred by the ADOPTER, including veterinary fees, once the adoption is finalized.
16. Understands that MABTR cannot predict what medical or temperament problems a dog may have in its lifetime.
17. Assume all risk of ownership of the dog, including injury or damage caused by the dog, including bites.
18. Accept periodic follow-up telephone calls/emails from MABTR to ensure compliance to all terms of this agreement.
19. If the terms and conditions of this Adoption Agreement are not upheld, MABTR reserves the right to terminate the agreement and to reclaim the dog at any point of the dog's life with no legal commitment to any monetary refund.

If for any reason, the adoption is not found to be satisfactory for the dog and/or the ADOPTER, the dog must be returned to MABTR. No refund will be made for returned dogs after the fourteen-day trial period.

The adoption fee is \$_____. For legal purposes the **value** on this adopted dog is no greater than \$500.

**Additional information/requirements beyond the hard copy documents provided to you in the adoption packet:*

- transport fee of \$25 applies** NOT potty trained timid/shy NOT good with children cat aggressive
 dog aggressive cancer removed a MIXed breed eye removed deaf blind treated for heartworm
 medication required (details below) food requirement (details below)

Why needing rehomed? puppy mill survivor owner surrender shelter release stray

I, the adopter, have received the proof of the following medical by a vet (check those that apply, all items located in adoption folder):
 rabies certificate distemper/DHPP heartworm test/HW spay(S)/neuter(N) other medical records rabies brochure (CO residences)

I fully and completely release MidAmerica Boston Terrier Rescue and its agents/volunteers harmless from any claim, cause or demand as a result of my adoption, ownership, care, maintenance or retention of the dog.

By signing below, I acknowledge that I have read and fully understand the terms and conditions of the adoption agreement as stated above and accept this document as a contractual agreement and legal ownership, which I will comply with.

Adopter's Signature: _____ & _____ Date: _____

Printed Name: _____ Home Phone: _____ Cell Phone: _____

Address/city/state/zip: _____ Email: _____

Rescue Administrator's Signature: _____ *Jennifer Misfeldt* _____

Name of Dog: _____ Gender: _____ Date of birth/Age: _____ Color: _____ Microchip#: _____

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