

M.A.S.H. Unit



Companion Animal Adoption Contract

Donation Amount: _____

Animal Name and BK#: _____

Date: _____

FOR VALUABLE CONSIDERATION, the undersigned having received from the Maricopa County Sheriff's Office Animal Safe Haven (M.A.S.H.), 102 W. Madison, Phoenix, AZ 85003, the animal identified below:

Species: _____

Breed: _____

Color: _____

Age: _____

This animal has been spayed/neutered by _____ on _____.

Known health problems/allergies: _____

Current medications: _____

THE ADOPTION AGREEMENT

THEREFORE, I, _____, the adopting party, a person over 18, agree to the following:

___1. I shall vaccinate this companion animal as follows:

Shots Due: Type: _____ Date: _____

Type: _____ Date: _____

Type: _____ Date: _____

___2. I shall have this dog or cat spayed/neutered by: Date: _____, or this dog or cat has already been spayed/neutered by _____ on _____.

___3. I will provide my pet with necessary and humane care, including food, fresh water, shelter, exercise, training and veterinary care and will not be cruel, mistreat or neglect my pet, or any animal, in violation of A.R.S. §13-2910.

___4. I agree to take all necessary measures to ensure my pet does not become infested with parasites or live in a parasite infested environment. This includes, but is not limited to, checking the animal (including ears and toes) and removing any harmful dirt, gum, burrs, thorns, ticks and fleas, following up with flea and tick prevention, and if needed, exterminating the yard and home with insecticide that kills fleas and ticks. I shall follow all safety precautions on said products so as to protect the animal from accidental poisoning.

___5. I agree that I shall not use any kind of physical force to discipline my pet. This includes, but is not limited to hitting the animal with a bare hand or any other injurious thing, including newspaper. I agree to use praise and humane obedience training to encourage appropriate behavior.

- ___6. I agree to equip my pet with a safe collar at all times. I understand that all dogs over 3 months of age residing in Maricopa County must be licensed, that dog licenses must be renewed annually, and that the license tag must be affixed to a collar on my dog at all times in accordance with A.R.S. §11-1008 and A.R.S. §11-1010. I agree not to remove any tags so that the animal may be identified so as not to be euthanized by the pound or other agencies in the event that it becomes lost. I will comply with all municipal, county, state and federal animal laws including rabies vaccination, dog license and leash laws.
- ___7. I am permitted to own this pet where I currently reside and it is not prohibited by any law, landlord/tenant rules, HOA rules or insurance policies.
- ___8. I agree that should the animal ever become unwanted, the custody of the animal will be returned to MASH or given to a No Kill Shelter.
- ___9. I agree to give MASH seventy-two (72) hours notice of any transfer of ownership of the animal.
- ___10. I acknowledge that if any law enforcement agency, including MCSO Animal Cruelty Investigators, receives valid information, of any form, of violation of animal cruelty laws involving this adopted animal, that I will be prosecuted to the full extent of the law.
- ___11. I understand that MASH does not know the health history of many of the animals received from cruelty and neglect cases, so MASH makes no guarantees, expressed or implied, as to the future health, fitness, temperament or pedigree of the animal.
- ___12. I understand the money donated for this animal is considered a Non-Refundable donation and therefore, no refund will be offered if the animal is returned for any reason.
- ___13. I understand MASH reserves the right to deny adoption if I have been incarcerated within the last 90 days or has any violent charges (this includes being charged or convicted of animal cruelty). If I am currently on probation, I will provide documentation from my probation officer authorizing me to adopt an animal.
- ___14. I also agree to follow these special instructions: _____

- ___15. I understand MASH reserves the right to visit the animal, with forty-eight (48) hours notice, to determine whether I am complying with the above listed provisions. MASH also reserves the right to call me to ascertain that I am in compliance with the above requirements. I agree to answer all questions honestly.

ANY VIOLATION OF THIS AGREEMENT WILL RESULT IN THE FORFEITURE OF THIS ANIMAL AND ALL RIGHTS WILL BE RETURNED TO THE MARICOPA COUNTY SHERIFF'S OFFICE.

Name: _____ Home Phone: _____

Address: _____ City/State: _____ Zip: _____

Driver's License Number: _____ State: _____

Alternative Contact: _____ Phone: _____

Adopter's Signature

MASH Staff Signature & Serial