



Cat Adoption Contract

P.O. Box 2352 - Fairfax, VA 22031

info@petsbringjoy.org

Rev. 3/12/2022

CAT NAME(S): _____ DESCRIPTION(S): _____

GENDER(S): _____ ESTIMATED AGE(S) OR DOB: _____ SPAYED/NEUTERED? ___ Yes ___ No

1. I will treat (name(s)) _____ (hereinafter "my PBJ cat(s)") as **family member(s), giving them loving care and attention**. I acknowledge that a healthy, indoor-only cat can live 20 years or more, and that if I am adopting, **I am committed to caring for my PBJ cat(s) for their full lifetimes**.
2. My PBJ cat(s) **will live indoors only**, as I recognize the many risks posed to a cat if allowed outdoors. This includes keeping cats off of balconies, porches, etc. and ensuring that windows/doors have secure screens in place. If children are in the home, I will educate them on the importance of being careful when entering/exiting the home, and on keeping doors closed otherwise.
3. **If ever my PBJ cat should go missing**, I will contact Pets Bring Joy (hereinafter PBJ) immediately for their assistance in searching for/recovering my PBJ cat.
4. **Microchipping**: PBJ provides courtesy microchipping for all cats adopted through our organization. Cats are initially registered to PBJ so that we will be notified in the event that the cat(s) go missing so that they may be safely returned. Should you wish to transfer their microchip registration to yourself upon adoption, please email us at microchips@pbj.org for instructions.
5. **Veterinary Care**: I will take my PBJ cat(s) to a licensed veterinarian **when vaccination updates are next due** or sooner if illness or injury occurs, and for **annual wellness exams every year** thereafter.
6. **I agree not to have my PBJ cat(s) declawed**. If I have any concerns about destructive scratching or any other behavioral problems, I will contact PBJ and will work with them to correct the problem; **as a last resort, I will return my PBJ cat(s) to PBJ rather than declawing them**.
7. I understand that PBJ does not place in any home any animal that is known to be sick or injured unless the condition is fully disclosed to the adopter. Despite the best efforts of PBJ to screen for medical conditions, I acknowledge that my PBJ cat(s) may have illness, injury, disability or other conditions that PBJ is unaware of, including illness/parasites/conditions that could be transmissible to humans or other pets. **I agree to take this risk on behalf of myself, my family, my pets, and anyone else who comes in contact with my PBJ cat(s) in order to help PBJ save lives**.
8. I will not sell or give my PBJ cat(s) away, nor will I abandon my PBJ cat(s) or surrender them to a shelter or rescue other than PBJ. **If at any time I can no longer care for my PBJ cat(s), I agree to contact PBJ immediately to arrange for their return**.
9. (If not already spayed/neutered) I agree to have my PBJ cat spay/neutered and rabies vaccinated with proof sent to PBJ by (date) _____ at the address above or via email to my rescue coordinator.
10. I agree to permit a PBJ representative to examine or make an inquiry about the above conditions and requirements at any time after I take possession of my PBJ cat(s). This includes scheduling a visit to my home and/or contacting my veterinarian.
11. I am accepting possession of my PBJ cat(s) at my own risk, and release PBJ from any and all liability arising out of possession of my PBJ cat(s).
12. I understand that failure to comply with the above provisions will result in forfeiture of my PBJ cat(s) to PBJ.

YOUR NAME: _____ PHONE: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL: _____

NON-REFUNDABLE ADOPTION FEE: _____ Payable online via debit/credit card: petsbringjoy.org/fee.html

EMERGENCY CONTACT NAME: _____ RELATIONSHIP: _____

PHONE: _____ EMAIL: _____

YOUR SIGNATURE: _____ DATE: _____

CHECK HERE IF SIGNED DIGITALLY: _____ I hereby verify that I have digitally signed this document.