

# Newfoundland Health and Rescue Inc.

## Adoption Contract



Dog's Name: \_\_\_\_\_ Sex: \_\_\_\_\_ DOB: \_\_\_\_\_

Description: \_\_\_\_\_ Microchip #: \_\_\_\_\_

1. In assuming responsibility for the above Newfoundland, I agree to never physically abuse, neglect or otherwise harm this dog. I will never allow this dog to run loose or be transported in an unsafe manner in the open bed of a pick-up truck. I agree to provide a safe, loving home, nutritional food, grooming upkeep and routine veterinary care as directed by Newfoundland Health & Rescue Inc. for this specific dog. In addition I agree to provide.
2. In the event that I am unable to keep this dog for any reason, I agree to notify Newfoundland Health & Rescue Inc. or the Newfoundland Club of America immediately. I further understand and agree that Newfoundland Health and Rescue Inc. retain all rights and decisions regarding placement of this dog and I will cooperate fully with their efforts.
3. Even though the dog I am adopting may be fully obedience trained, I agree to enroll and participate in an Obedience course to more rapidly establish respect and rapport with this dog.
4. Newfoundland Health and Rescue Inc. strive to place Newfoundlands that are healthy and have temperaments typical of the breed. Each Newfoundland received by the committee is seen by a veterinarian before placement. However, the committee does not guarantee the health or temperament of any Newfoundland that is placed. Costs for medical care and annual check-ups are the sole responsibility of the adopting person(s) after placement. In addition, each Newfoundland placed must be provided preventative medications, vaccines, parasite control and any other medical care necessary to keep the dog in good health.
5. It is agreed that Newfoundland Health & Rescue Inc., The Newfoundland Club of Northern California, The Newfoundland Club of America, Inc. and others working for and associated with these organizations shall not be responsible for any damage or injury caused by a Newfoundland placed through Newfoundland Health and Rescue Inc. This includes, but is not limited to, dog bites to persons or animals, or property damage.
6. I agree to notify Newfoundland Health & Rescue Inc. if I move. I further understand and agree that my new residence must also pass a home inspection. In the event that I move outside the boundaries of the Newfoundland Club of Northern California, Newfoundland Health & Rescue Inc. reserves the right to employ a Newfoundland Club of America member to perform the inspection.
7. The Newfoundland Club of Northern California holds 5 general meetings per year. It also holds 2 water tests, 2 draft tests, dozens of training workshops and several public appearances that draw attendance from the membership. I agree to bring my adopted Newf to any one of these events at least once a year. In the event that such attendance would prove too much of a hardship on me or my family, I will make arrangements with Newfoundland Health & Rescue Inc. to visit my home on an annual basis.

The undersigned has read, understands, and agrees to the conditions set forth and hereby further agrees that if the terms and conditions of the Agreement are not upheld by the undersigned and/or if any misrepresentations have been made to Newfoundland Health & Rescue Inc., NH&R reserves the right to terminate this Agreement and the dog must be returned to NH&R. Should it become necessary for Newfoundland Health and Rescue Inc. to take legal action to recover the Newfoundland or otherwise enforce the provisions of this Agreement, the undersigned agrees to pay all court costs and reasonable attorney's fees.

Date: \_\_\_\_\_ Adoption Fee \$ \_\_\_\_\_

*(Note: ALL adults in household must sign)*

Signature \_\_\_\_\_

Print name \_\_\_\_\_

Signature \_\_\_\_\_

Print name \_\_\_\_\_

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

Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ e-mail \_\_\_\_\_

Rescue Representative: \_\_\_\_\_ NHR Contact #: \_\_\_\_\_