

Osan Air Base Veterinary Treatment Facility and Animal Shelter
Adoption Agreement and Understanding

Owner's Name : _____ Date: _____

Canine / Feline Pet Name/Stray #: _____

Animals adopted from the Osan Veterinary Treatment Facility cannot be guaranteed to be completely healthy. The clinic examines and tests each animal as applicable to age and species in an effort to adopt out healthy animals. Spaying or neutering and micro chipping are mandatory for all adoptions and will be scheduled at the time of adoption. The clinic does not cover any other medical services after adoption. ***Adoption fees are non-refundable.***

Adopter's Agreement and Understanding: (read and initial next to each item)

- _____ 1. I agree the animal is being adopted for myself and my family and will not be sold or given to another party. This animal is a companion pet to be cared for by willing and responsible adult members of the household.
- _____ 2. I understand the time commitment a pet requires and have made adjustments to my schedule and lifestyle to provide exercise, attention, and supervision with my children when playing with the pet.
- _____ 3. I have permission from my landlord to have a pet. I have considered the needs of the pet and my house is suitable and safe for this type of pet.
- _____ 4. I agree this is a permanent adoption and understand this pet can exceed 10 years in age. In the event of a deployment or other travel, I will have a care provider of either a boarding kennel or a responsible friend or relative. In the event of a PCS move, I will make all necessary arrangements for this pet to move with me to my next duty assignment.
- _____ 5. I understand the cost of owning a pet. I am willing and able to provide all cost of food; routine, annual, and emergency medical care; boarding kennels or pet-sitters; landlord costs; PCS move cost (i.e. airline travel, quarantine if applicable, boarding kennels or pet-sitters, and any other related cost during relocation). If needed, I will seek financial assistance.
- _____ 6. I agree to maintain this pet's health with annual health check ups, vaccinations, heartworm preventatives, flea and tick preventatives, routine or emergency care, and any other medical needs my veterinarian recommends.
- _____ 7. I agree to spay or neuter this pet (if applicable). I will return at the scheduled time for this surgery.
- _____ 8. I understand that this pet cannot be guaranteed to be completely healthy. I understand this pet has been examined and tested for heartworms (dogs 6 months or older) or feline leukemia and feline aids (cats). Upon adoption of this pet, I release Osan Veterinary Treatment Facility from any further obligation to provide medical care, except paid for by myself.
- _____ 9. I understand the adoption fee is non-refundable. I have considered all areas of owning a pet and am able to make this commitment.

Owner's Signature: _____

Counselor's Signature: _____