



Bergen County Protect and Rescue
 302 2nd Street Cliffside Park, NJ 07010 (201) 945-0649
 www.BCRescues.org

Adoption Application

Adopter: _____
 Street: _____
 City: _____
 State: _____ Zip: _____
 Telephone: _____
 Cell Phone: _____
 Email: _____

Please give staff your photo ID card to photocopy

How did you hear about us?

For Office Use Only: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
BCP&R Rep: _____	Date: _____
Dog: _____ Cat: _____	Age: _____
Name: _____	Color: _____
Breed: _____	Gender: _____
Rabies Tag #: _____	Altered: Yes No
Adoption Fee:\$ _____	Deposit:\$ _____
Micro Chip Sticker	Intake #
<input type="text"/>	_____

Residence Verification

Type of Dwelling: House [] *Apartment [] Other [] Do you: Own [] Rent []

**If I reside in a home or an apartment which is not owned by me, I must have/bring written approval from my landlord (including landlord telephone number) or copy of lease pet clause before proceeding with this foster/adoption.*

Initial here to acknowledge: _____

Landlord's Information

Landlord's Name: _____ Landlord's Phone#: _____

Personal Reference Verification

Please list the names of **two people who can verify personal information about you.*

Name #1: _____ Name #2: _____
 Phone: _____ Phone: _____

Bergen County Protect and Rescue
302 2nd Street Cliffside Park, NJ 07010 (201) 945-0649
www.BCRescues.org

Adoption Contract

In adopting this pet from Bergen County Protect & Rescue Foundation, I understand that:

- 🐾 I certify that I am of at least 21 years of age.
- 🐾 I understand that I will not receive a refund after returning this pet. **Adoption fees are non-refundable.**
- 🐾 I will register my new pet in town within 7 days from date of adoption. (proof of rabies req'd by town)
- 🐾 I will not sell or use this animal for any medical or experimental purposes.
- 🐾 I will not sell or relinquish animal for any reason to another person or agency without BCPR's consent.
- 🐾 If for any future reason I am unwilling or unable to keep this animal, I will contact BCPR immediately and assist in producing a possible solution or wait for available placement of this pet at the shelter.
- 🐾 I understand that the shelter cannot guarantee the health, temperament, or training of the above –described animal and hereby agree to release them from all liability once the animal is in my possession.
- 🐾 I understand that my pet's age and breed has been estimated to the best of BCPR's ability.
- 🐾 BCPR reserves the right to visit the animal at a pre-arranged time to check the animal's well-being.
- 🐾 If this animal gets lost, I will notify Home Again 1888 466-3242 immediately as to its disappearance. I will also notify my local police department and animal control agency.
- 🐾 It is important to follow advice/guidelines in your adoption packet to ensure a great and safe transition.
- 🐾 Never leave children unattended with your new pet.
- ➔ 🐾 Stress can result due to a change in environment and the animal may become ill or display behavioral changes. I understand that BCPR cannot assume responsibility for these unforeseen developments. Should this animal exhibit signs of illness within the initial 72 hours from leaving our facility, I should not hesitate to contact BCP&R for advice or direction as to the recommended course of action. Failure to do so will result in the adoptee assuming all financial costs incurred if medical treatment is necessary.
- 🐾 Proof of vaccinations and medical history will be provided to me at the completion of this adoption.
- 🐾 I will assume the responsibility of updating and providing my new pet with medical care from today forward. BCPR will not reimburse me for any costs incurred for any reason following my adoption of this animal.
- 🐾 If I do not comply with any of the above, BCPR reserves the right to reclaim this animal.

I have today received from BCP&R the animal described above and hereby accept possession, care and custody for this animal. I discharge BCP&R, its officers and members forever from liability for any injury or damages to any person or property caused in the future by said animal and from any causes of action, claims, suits or demands whatsoever that may arise as a result of such injury or damages.

BCPR Rep _____		Adopter's Name _____		Phone _____	
Address _____		City _____		State _____	Zip _____
Email _____			Signature _____	Date _____	
Name _____	Breed _____	Gender _____	Rabies # _____	Age _____	
Adoption Fee \$ _____	Deposit \$ _____	<input type="checkbox"/> check	<input type="checkbox"/> cash	<input type="checkbox"/> credit	Date _____
Balance \$ _____	<input type="checkbox"/> check	<input type="checkbox"/> cash	<input type="checkbox"/> credit	Date: _____	Micro Chip # _____

Bergen County Protect and Rescue
302 2nd Street Cliffside Park, NJ 07010 (201) 945-0649
www.BCRescues.org

Veterinarian's Information

Do you currently have a vet? **Yes / No** *If not, please indicate the vet you intend to use for your new pet.*

Veterinarian's Name: _____

Veterinarian's Number: _____

Name on file at Vet's office: _____

🐾 Does anyone in the household have pet allergies? **Yes / No**

🐾 How many people live in your home? Adults [] Children [] Ages: _____

🐾 If no children live in the home, are children frequent visitors to your home, what are their ages?

🐾 Do you have a private fenced yard? **Yes / No** Fence Height: _____

🐾 Are there any other pets in the household now and if so, what kind/age?

🐾 1.

🐾 2.

🐾 Are your pets current with vaccines? **Yes / No** Are your pets spayed or neutered? **Yes / No**

🐾 Where will your pet spend most of the day? _____

🐾 How many hours per day will the cat/dog be left alone? _____

🐾 Have you had a pet before? **Yes / No**

🐾 What happened to that pet? _____

🐾 What will you do if you can no longer keep your pet? _____

🐾 What will you do if your pet requires training? _____

🐾 Are you committed to helping your adopted pet through any problem he may have? **Yes / No**

🐾 Will you provide/share info on your pet(s) progress with us or allow a home visit as stated in our contract? **Yes / No**

Bergen County Protect and Rescue
302 2nd Street Cliffside Park, NJ 07010 (201) 945-0649
www.BCRescues.org

For Shelter Use Only – Do not write below this line – Thank You:

Landlord Approval: Yes No Comments: _____

Residence Check: Yes No Comments: _____

Veterinary Reference: Yes No Comments: _____

Reference Check #1: Yes No Comments: _____

Reference Check #2: Yes No Comments: _____

Date: _____ Approved by: - _____ Denied by: _____

Adoption Counselor Checklist:

Date: _____ Animal Name/ ID Number: _____

Vaccination verification

Rabies Certification/ Tag

Spay/ Neuter Program

Microchip Paperwork/ Tag

Veterinarian Recommendation

Training Recommendation

Feeding Brand and Recalls

Meet and Greet Completed (*if applicable*)

Household Consent