



**Anasazi Animal Clinic, Inc.**  
**425 W. Guadalupe Rd., Suite 112**  
**Gilbert, AZ 85233**  
**480.497.0505 \* AnasaziVet.com**

**Debra A. Nossaman, DVM**  
**Gloriana L. Halterman, DVM and Laura J. Diltz, DVM**  
**Lisa Elliott, CVT \* Polaris Nevares, CVT**

### **Pet Adoption Agreement**

Name \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

I acknowledge receiving from the Anasazi Animal Clinic, Inc. a:

Name \_\_\_\_\_ Age \_\_\_\_\_ (as determined by veterinary practice)

Breed \_\_\_\_\_ Color \_\_\_\_\_

Microchip/Tattoo ID Number \_\_\_\_\_ Weight \_\_\_\_\_

Dog \_\_\_\_\_ Cat \_\_\_\_\_ Puppy \_\_\_\_\_ Kitten \_\_\_\_\_ (check one)

Male \_\_\_\_\_ Female \_\_\_\_\_ Neutered Male \_\_\_\_\_ Spayed Female \_\_\_\_\_ (check one)

Vaccination History \_\_\_\_\_

Deworming History \_\_\_\_\_

I agree (please initial each statement):

\_\_\_\_\_ To provide proper and adequate food, water, housing, exercise, and grooming for this pet and to treat him/her humanely at all times.

\_\_\_\_\_ To provide veterinary care in the form of annual vaccinations, preventive heartworm medications as appropriate, and such veterinary medical care as is necessary to prevent and/or treat accidents and illnesses.

\_\_\_\_\_ To obey local licensing and animal confinement laws.

\_\_\_\_\_ Not to sell, give away, or abandon the animal if I no longer desire it but, instead, to return him/her to the above veterinary practice or to a local animal shelter.

***“Your Healthcare Partner”***





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\_\_\_\_\_ Not to sell, give away, or use this animal for experimental purposes, allow him/her to engage in dog fighting, or pursue any guard dog or attack dog training with him/her.

\_\_\_\_\_ That if it is determined that this pet has not been spayed or neutered, I will have him/her spayed or neutered before he/she reaches six months of age if he/she is not an adult, or within two months if he/she is an adult.

\_\_\_\_\_ That my place of residence in a home, apartment, condominium, townhouse, public housing complex, or other housing complex allows for the ownership and occupancy of the pet I am adopting.

I acknowledge that (initial each statement):

\_\_\_\_\_ I have been informed that all animals can carry and transmit diseases, some of which affect people, including bacteria, viruses, parasites, and ringworm, and that these diseases may be undetectable in what appears to be a healthy animal at the time of adoption.

\_\_\_\_\_ I am aware that pets may exhibit normal but potentially undesirable behaviors including, but not limited to, aggression, house soiling, biting, scratching (people, furniture, and woodwork), barking, digging, mounting people's legs, marking with urine (dogs), and spraying urine (cats), and that these normal behavior patterns may be difficult to manage. No one at this facility has told me that this pet will **not** engage in any of these behavior patterns.

\_\_\_\_\_ The above veterinary practice is in no way responsible for any damage the animal may inflict on another person, my property, or the property of another, and no attempt will be made by me to hold the above practice responsible.

\_\_\_\_\_ I am aware it usually costs between \$250.00 and \$750.00 per year to feed, house, train, and provide pet health insurance and/or veterinary care for a pet and that I am financially able to meet these expenses for my adopted pet.

\_\_\_\_\_ I accept the animal as it is at the time of adoption and understand that the above veterinary practice is not responsible for any medical conditions not readily detected prior to or at the time of this adoption or discovered after such adoption.

\_\_\_\_\_ I have read this agreement and release the above practice from any present or future liability associated with my adoption of this animal.

\_\_\_\_\_  
Signature of Adopter

\_\_\_\_\_  
Date

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\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

## **Anasazi Adoption Advantages**

### **Feline adoption price of \$65.00 includes:**

- Feline Leukemia Test
- First set of upper respiratory vaccinations (FVRCP)
- Sterilization at 6 months of age
- Worming

The normal price of the above services would total approximately \$250 - 350

### **Canine adoption price of \$65 / \$85 / \$105 (Depending on size) includes:**

- First set of Parvo-Distemper vaccinations (DA<sub>2</sub>PPV)
- Sterilization at 6 months of age
- Worming

The normal price of the above services would total approximately \$300 - 400

1. Anasazi Animal Clinic, Inc. has a two-week grace period in which the animal may be returned if not compatible in your environment. Please be aware that the adoption fee is non-refundable so that we are able to rescue the next needy animal.

\_\_\_\_\_  
Signature of Adopter

\_\_\_\_\_  
Date

2. Potential parents interviewed by:

\_\_\_\_\_  
Dr. Nossaman or Lisa

\_\_\_\_\_  
Date

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