



Another Chance Cat Adoption

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INTAKE AND RELEASE CONTRACT

Cat Name _____ Date _____

This agreement is entered into this date by ACCA and Applicant for the release of interest in the above named cat, which will now reside within the ACCA foster care network until permanently placed into a forever home. Upon this date ACCA is the sole owner of the above named cat.

Description of Cat

Sex: M F Spayed or Neutered: Y N

Breed _____ Color _____ Age of Cat _____

Micro-chipped: Y N (if "Yes") Company and ID Number _____

Current Veterinarian (name, address, phone) _____

Date of last Vet visit _____ Reason for visit _____

Date of last Vaccinations _____ Type(s) Given _____

Has cat ever been diagnosed with an illness: Y N (if "yes") Description _____

Is cat taking any medications: Y N (if "yes") List of meds: _____

Feeding Schedule: Free Feeding Scheduled Feeding Times: _____

Food Type: Dry Canned Both Brand(s) _____

Cat gets along with: Other cats Dogs Other Animals Children

Details _____

Does cat like to be handled/picked up _____

Is there an area where cat does not like to be touched? _____

Favorite toy, activity or object _____

In your own words, describe cat's personality _____

Any behavioral problems (i.e. not using litter box, scratching, etc.): Y N (if "Yes") Describe _____

Reason for giving up cat at this time/any health concerns _____

Terms and Conditions

1. We would like to encourage a \$100.00 donation to help care for the above named cat. ACCA will be providing food, medical, and care for an undetermined amount of time until the cat will be placed into its forever home.
Initial_____
2. All information on this Intake/Release form is true and accurate to the best of applicant's ability and is not knowingly withholding information on the health of the above named cat. **Initial**_____
3. If it is found after reviewing veterinary records that applicant has knowingly withheld a health condition of above named cat, ACCA reserves the right to seek liquidated damages, court costs, collection costs, and attorney fees. Payment of damages shall not mean the cat will be returned to applicant. **Initial**_____
4. Applicant will provide a copies of, and release, all medical records, spay/neuter certificate, current health check within the previous three months, and vaccination history. Applicant will list any and all veterinarians used while the above named cat was in the applicant's care. **Initial**_____
5. Applicant has disclosed any medications used by, and all health conditions of, the above named cat.
Initial_____
6. The above named cat has been tested for FIV/FeLuk and the results were negative. **Initial**_____
7. The above named cat has not been diagnosed with a serious illness within the last year. **Initial**_____
8. The above named cat has not had problems with diarrhea or vomiting within the last month. **Initial**_____
9. ACCA will not euthanize the above named cat due to overpopulation. **Initial**_____
10. This agreement shall insure to the benefit of, and is binding upon, adopter and ACCA including their successors or beneficiaries. Both parties have fully read, understand, and agree to the terms and conditions of this contract.
Initial_____

In testimony whereof, ACCA and Applicant to sign on this date:

ACCA Board Signature_____ Printed Name_____ Date_____

Applicant Signature_____ Printed Name_____ Date_____

Applicant Address_____ Phone Number_____