



## ITALIAN GREYHOUND RESCUE FOUNDATION ADOPTION AGREEMENT

### DOG INFORMATION

Name:		Date:	State:
Age:	Gender:	IGRF Number:	Canine Recovery:
Color:		Microchip:	
Other identifying characteristics:			

### VETERINARY HISTORY

Date of rabies vaccine:	Date of distemper/parvovirus vaccine:	Date of heartworm test:
<input type="checkbox"/> 1 year <input type="checkbox"/> 2 year <input type="checkbox"/> 3 year		Date preventative last given:
Date of fecal exam:	Date/type of other vaccines given:	

### TERMS AND CONDITIONS

(initial each statement to indicate agreement)

In consideration of receiving the Italian Greyhound (referred to in this agreement as "IG") described above from Italian Greyhound Rescue Foundation, Inc. (IGRF), the undersigned new owner ("Adopter") agrees to be bound by the following terms and conditions:

<b>PLEASE INITIAL</b>	<p>1. I agree that the IG will be kept exclusively as an indoor pet and will not be used in any way detrimental to the dog (i.e., medical research, abuse, neglect, etc.) and not maintained as a yard dog, (kept outside). The primary function of the IG will be that of a companion.</p>
	<p>2. I agree that I will not transfer, sell, give, trade or in any way change custody of the IG from me to any other person or entity, including, without limitation, any laboratory or other rescue or humane group. The IG will not be sold or given away. It can only be returned to IGRF. If I no longer want or cannot keep the IG, I acknowledge that I am required to return the dog to IGRF. If the IG is no longer wanted or can no longer be kept, and if I have moved more than 50 miles further away from the place of adoption, I assume sole responsibility and expense for returning the dog promptly and safely to IGRF. I shall immediately notify IGRF of my intent to give up the dog. Further, in the event of any material dispute concerning the ownership or care or condition of the IG, IGRF may, at its option, reclaim the IG.</p>
	<p>3. This IG will only be euthanized in the case of the IG's terminal illness or injury, or old age accompanied by unreasonable pain and suffering. Euthanasia must be performed by a licensed veterinarian.</p>
	<p>4. I will notify my IGRF representative immediately if this IG is lost or stolen and will make every effort to locate the dog. I will notify Canine Recovery if the dog is lost or stolen (they hold the ID tag info) and make them aware as soon as possible that the dog is lost or stolen. I will also promptly notify IGRF if the IG dies or sustains a serious injury requiring other than routine care.</p>
	<p>5. I will keep the ID tag known as the Canine Recovery Tag on the IG at all times. The tag information must be changed within 30 days if I move or if my phone numbers change. My rescue representative must also be made aware of any changes. Canine Recovery Toll Free # is 888-215-9995.</p>

<b>Please Initial:</b>	
	6. I will have the IG seen by a veterinarian as soon as possible after adoption and placed on the appropriate vaccination and veterinary health program as advised by such veterinarian. I agree to provide proper food, fresh water, indoor shelter, protection, kind treatment and medical care for the life of the IG.
	7. I will keep the IG on leash at all times when not in a safe, enclosed and fenced area. I will not tie the IG outside at any time nor will I leave the IG outdoors while I am away from home. The IG will not be confined in a yard with "underground" or "electric fencing". Also the IG will not be trained for behavioral issues or barking with a static correction collar or what is commonly referred to as a "no bark" collar.
	8. I will provide the IG with regular veterinary care including required vaccines, dental care and parasite checks.
	9. I will never transport the IG in an open vehicle or in any other way that will endanger the IG during transport.
	10. I understand that IGRF reserves the right to repossess the IG (at my expense) should any portion of this contract be breached by me or should IGRF determine, in its reasonable discretion, that I have neglected or mistreated this dog.
	11. I agree to allow IGRF to periodically check on the dog, at reasonable times, to be assured of compliance with the above terms.
	12. I certify that I have never been convicted of a violation of any ordinance or statute enacted pursuant to animal cruelty, neglect or abandonment.
	13. In consideration of IGRF's transfer of the adopted dog to me, as the adopter, I agree that IGRF, its trustees, officers, employees, agents, successors and assignees, shall have no liability to me for any damages for breach of duty or contractual obligation or any other claim of any kind, at law or equity, in connection with the IG whether presently existing or arising in the future. If, for any reason, the IG is returned to IGRF, or if this Agreement is terminated for any reason, IGRF shall have no obligation to pay me any refund, reimbursement or any other amount or fee.
	14. I agree to indemnify and hold harmless IGRF, its trustees, officers, employees, agents, successors, assigns, all members of the Italian Greyhound Rescue Foundation, Inc. from and against any and all demands, claims, causes of action, or judgments, and any and all expenses (including, without limitation, reasonable attorney's fees) incurred in connection with this agreement, including, without limitation, claims of any third party for injury to person, loss of life, or damage to property.
	15. Disclaimer of Uniform Commercial Code warranties. THE ADOPTED DOG IS FURNISHED TO THE ADOPTER AS IS, WITH ALL FAULTS, AND WITHOUT ANY REPRESENTATION, GUARANTEE OR WARRANTY CONCERNING ITS PERFORMANCE OR CONDITION. ANY WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE ARE DISCLAIMED BY IGRF AND WAIVED BY THE ADOPTER.
	16. If any party commences litigation against any other party for the specific performance of this Agreement, or for damages for the breach of this Agreement or otherwise for enforcement of any remedy under this Agreement, the parties waive any right to a trial by jury and, in the event of any commencement of litigation, the substantially prevailing party shall be entitled to costs and reasonable attorney's fees in any action or proceeding arising out of this Agreement and/or in any action or proceeding to enforce a judgment based on a cause of action arising out of this agreement. All litigation shall be filed and prosecuted in the state in which the dog was housed by IGRF before adoption.
	17. This agreement constitutes the final, complete and exclusive statement between the parties to this Agreement and supersedes all prior or contemporaneous understandings or agreements of the parties, and is binding on and inures to the benefit of their respective heirs, representatives, successors and assigns. Neither party has been induced to enter into this Agreement by, nor is either party relying on any representation or warranty outside those expressly set forth in this Agreement. Any agreement made after the date of this Agreement is ineffective to modify, waive, or terminate this Agreement, in whole or in part, unless that agreement is in writing, is signed by a duly authorized representative of IGRF and the Adopter, and specifically states that agreement modifies this Agreement.
<b>Dog Name/Number:</b>	

	18. This Agreement shall be governed by, and construed in accordance with laws of the state the IG was housed in before placement. If any term or provision of this Agreement is, to any extent, held to be invalid or unenforceable, the remainder of this Agreement shall not be affected, and each term or provision of this Agreement shall be valid and be enforced to the fullest extent permitted by law. If the application of any term or provision of this Agreement to any person or circumstances is held to be invalid or unenforceable, the application of that term or provision to persons or circumstances other than those as to which it is held invalid or unenforceable, shall not be affected, and each term or provision of this Agreement shall be valid and be enforced to the fullest extent permitted by law.
	19. I understand that this Agreement involves important legal rights and obligations, and I acknowledge that I have had an opportunity to consult with an independent legal adviser of my choosing. I further acknowledge that I have voluntarily and knowingly signed this Agreement, in full recognition of the nature of the undertakings that I have assumed under this Agreement.

**ADOPTER INFORMATION AND SIGNATURES**

Adopter Names:		
Physical Address: <i>(No PO Boxes)</i>		
City:	State:	Zip:
Primary Phone:	Email:	
<b>Adopter 1 Signature:</b>		Date:
<b>Adopter 2 Signature:</b>		Date:
IGRF Representative Signature:		Date:
Phone:	Email:	

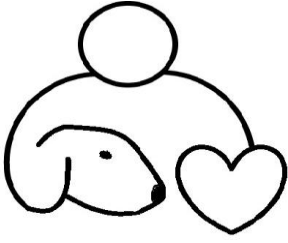
**FINANCIAL AGREEMENT**

The Italian Greyhound Rescue Foundation (IGRF) fund is comprised of donations from private individuals and adoption donations. The rescue fund is maintained by the IGRF Treasurer. All donations should be made out to:  
**Italian Greyhound Rescue Foundation Inc.**

The suggested donation for adopting a rescue dog is variable. It is based upon the dog's age and the area of the country the dog is located in. The donation will help offset the costs of spaying/neutering, vaccinations, dental care and any other expenses incurred while preparing the rescue dog for transition to a new home. In areas where the dogs are shifted from state to state, the higher donation suggestion will prevail.

Date:	State:	Amount:
Check #:	Driver's License/State ID:	
<b>Adopter 1 Signature:</b>		Date:
<b>Adopter 2 Signature:</b>		Date:
IGRF Representative Signature:		Date sent to Area Coordinator:
IGRF Representative Name:		

*A copy of this agreement will be kept in the IGRF Files - Form AG-03242020*



# Canine Recovery

*Get Your Hound Found!*

## DOG INFORMATION

IGRF Number:		Canine Recovery:	
Dog's Name:	Gender:	Color:	
Microchip:		Date of Adoption:	
Special Needs/ Other Comments:			

## ADOPTER INFORMATION

Adopter Names			
Physical Address: <i>(No PO Boxes)</i>			
City:		State:	Zip:
Primary Phone:		Alternate Phone:	
Email:		Send me Rescue updates and news via email? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## EMERGENCY CONTACT

Name:	Phone:
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## VETERINARIAN

Name (doctor or practice):	Phone:
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## RESCUE VOLUNTEER

Name:	Phone:
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Fax to 678-804-6911 or email scan to [canine.recovery@igrescue.info](mailto:canine.recovery@igrescue.info)

*Form CR-03242020*