

# ANIMAL ADOPTION RELEASE & WAIVER

## IN ORDER TO BE CONSIDERED FOR AN ADOPTION, YOU MUST:

* **have the knowledge and consent of all members of your household and landlord if applicable;**
* **be 18 years of age or older;**
* **be aware of municipal bylaws where you live in case there are restrictions for this species;**
* **understand that the Brandon University Animal Care Committee (BUACC) must approve your application.**

## Adopted Animal(s) – Description:

|  |  |  |
| --- | --- | --- |
| Species: | Strain: | Type: |
| Age: | Number: | Male:  Female: |
| Description: | | |
| Current Location: | | |
| Date of Expected Departure: | | |

## Adopted Animal(s) – Adopter Statement:

I,      , the adopter, wish to adopt the above described animal(s).

I agree to care for the above-described animal(s) in a humane and responsible manner and to provide it with clean, adequate and appropriate shelter, food, water and veterinary care. If, at any time, I am unable to care for an animal which I adopted, I will surrender it to an approved SPCA (Society for the Prevention of Cruelty to Animals) Facility.

I agree that Brandon University makes no representations or warranties, expressed or implied, about the above-mentioned animal(s)’s temperament or state of health, save any disclosure listed below by the Consulting Veterinarian, and is hereby absolved from any liability for future damages or injuries caused by said animal. I also agree that Brandon University further gives no guarantees, expressed or implied, of the suitability of the animal to me, the adopter.

I agree to hold in confidence and not to disclose any proprietary or confidential information related to the use of this animal in any research project, unless specifically authorized in writing to do so by Provost and Vice-President (Academic) or their duly authorized representative.

I agree to follow directives as to specific animal care recommended by the Consulting Veterinarian for the animal(s) involved. By signing below, I certify that the information I have given is true and that any misrepresentation of facts may result in losing the privilege of adopting an animal from Brandon University. I understand that the Brandon University Animal Care Committee has the right to deny my request to adopt an animal.

### Adopter’s Information:

Complete Address (including City and Postal Code):

Telephone Number:

Adopter’s Signature: 

*(Click the picture icon to insert a digital signature/insert image)*

Date:

## Adopted Animal(s) – Consulting Veterinarian Statement:

I have examined the above-described animal(s) and, to the best of my knowledge, have found it/them to be in good health and temperament at the time of the examination.

**Special Remarks/Comments:**

Name:

Signature:



*(Click the picture icon to insert a digital signature/insert image)*

## Adoption: Accepted Denied