



**Head Butt Hotel**  
**1336 Poole Street, North Myrtle Beach SC 29582**  
 ♦ Phone: Christine Zois (973) 619 2956 ♦  
 Email: [Christine@Headbutthotel.org](mailto:Christine@Headbutthotel.org)

**ADOPTION CONTRACT**

Animal's Name: \_\_\_\_\_ Description: \_\_\_\_\_ Sex: \_\_\_\_\_

Date of birth: Age: \_\_\_\_\_ Id#: \_\_\_\_\_ Microchip # \_\_\_\_\_

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Adopter's name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License # \_\_\_\_\_ State: \_\_\_\_\_

I, \_\_\_\_\_, agree that I am adopting the above described animal(s) solely for me and my immediate family as a pet. I agree that I will not abandon, sell, give away, or dispose of the animal(s) to another party, for any reason whatsoever.

**Donation:** I understand that my adoption donation of \$ \_\_\_\_\_ is nonrefundable and is used by the Head Butt Hotel to defray the costs of food, shelter, titer testing, veterinary care, and spaying/neutering. Additional donations are greatly appreciated, and any expenses for transport arrangements are separate and additional.

**Return Policy:** I agree that if I am no longer able or willing to take care of the animal (s), for any reason whatsoever, inclusive of any possible and or future health issues which could result in the euthanasia of this pet(s), premature, unnecessary, unwarranted, or otherwise, I will first contact an authorized representative of the Head Butt Hotel, to reclaim the animal (s). HBH will respond and arrange pick up / meeting location no later than 14 days from my request. I understand that I am responsible for the care of the animal(s) until it has been delivered safely to a representative of the Head Butt Hotel, together with the original and current veterinary records. The adopter consents to reclamation of this animal(s), by the HBH at any time, for whatever reason, and/or failure to comply with the terms of this contract.

Initial: \_\_\_\_\_

**Proper Care.** I agree to take care of the animal(s) in a responsible and humane manner, providing adequate food, shelter, water, grooming, and veterinary care. To optimize the health of this animal, I agree to continue with the established nutritional regimen, which has been provided.

Initial: \_\_\_\_\_

I assume full responsibility for its' well being, providing adequate and wholesome food and fresh water, shelter from weather, and any veterinary care needed to provide for the continued well being of this animal.

Initial: \_\_\_\_\_

This pet is being furnished with a current Rabies Vaccination or a Titer test from Kansas State. To comply with the South Carolina Rabies Statute which requires continuous protection of pets, we check titers in 3 year intervals, being there is no difference between the 1 and 3 year vaccinations besides the # printed on the manufacturer label. I agree that under NO circumstances, will I consent or allow any veterinarian to proceed with any further vaccinations regardless of county or state statutes, unless this simple \$55 blood test which can be done as part of the annual wellness exam and ordered thru the Protect the Pets website (<http://www.protectthepets.com/order-a-titer.html>) with Kansas State Veterinary Diagnostic Laboratory reveals an additional booster is in fact necessary. I understand that even a second blindly administered vaccination, constitutes a likely vaccination overdose which will ultimately result in serious implications, detrimental to the health of this pet. Once the titer test has been completed, if the results reveal, that this pet in fact requires an additional booster at some point during their lifetime, I agree to have ONLY a Merial Pure Vax feline 3 year non- adjuvanted rabies booster administered. Once the results of the titer testing establish your pet's immunity, Dr. John Robb can issue a Protect the Pets Rabies Immunity Certificate if necessary, once the Kansas State Titer test report has been submitted to him via email: [drrobb@protectthepets.com](mailto:drrobb@protectthepets.com)

Alternatively and preferably, our non-profit will sponsor the KSVL titer testing through our designated local Protect the Pets vet.

Initial: \_\_\_\_\_

I agree to allow an authorized representative to follow-up either in person or by telephone and for the first year from adoption date, we would like to receive quarterly updates including pictures to ensure this is a good match for both the client and pet

Initial: \_\_\_\_\_

This animal (if canine) will not, under any circumstances, be left outdoors unattended to, given the extreme danger that exists with regard to the theft of animals to be used for bait and fighting. I further agree to comply with all state and county legal and licensing requirements in the residing state. Felines are strictly indoor only pets.

Initial: \_\_\_\_\_

**Declawing.** I agree that I will not declaw the animal (s) under any circumstances.

Initial: \_\_\_\_\_

**Animal Welfare Violations.** I certify that no member of my household has been convicted of an animal welfare law violation, including but not limited to cruelty, abandonment, or neglect.

Initial: \_\_\_\_\_

**No Representations.** I understand that the Head Butt Hotel does not make any warranties, expressed or implied, on the temperament, behavior, or health of the animal (s). I agree to absolve the Head Butt Hotel and its' authorized representatives, from any liability, damages, or injury caused by the animal(s). The adopter shall have this pet examined within 2 weeks of adoption and treated for any existing conditions. Should the animal be too young for surgical alteration, the animal will be altered within the next consecutive 12 weeks, and the countersigned adoption contract will be furnished upon receipt of veterinary documentation for sterilization.

Initial: \_\_\_\_\_

The adopter shall quarantine this pet from other animals for a period of two weeks. The adopter absolves the Head Butt Hotel and its' authorized representatives, from liability for the transfer of any disease/condition of the dog/cat to any person or any other animal during or at any time after this period. The adopter further indemnifies the Head Butt Hotel and its' authorized representatives against any and all medical and/or veterinary costs relating to the transfer of any disease/condition to any person or other animal.

Initial: \_\_\_\_\_

The adopter indemnifies the Head Butt Hotel and its' representatives, from any responsibility for this animal, directly or indirectly, for veterinary expense, mortality, allergy, or any other condition resulting from contact with the said animal, actions of said animal, or for any other reason(s). The adopter further indemnifies the Head Butt Hotel, its' directors, officers, and volunteers, against any and all claims, known or unknown, now or hereafter, arising in

connection with this animal. The adopter agrees to reimburse the HBH for any and all expenses, including court costs and attorney fees, incurred in enforcing the terms and provisions of the contract. The laws of the State of South Carolina shall apply to any dispute arising out of this contract.

I certify that I have read and fully understand the terms of this agreement and that I will comply with the same. I agree that the HBH and its' authorized representatives have the right to reclaim the animal(s) if I fail to comply with any of the terms of this agreement, if any statements made by me are untrue, and /or if my check for the adoption donation is returned. I certify that I am at least 21 years and I acknowledge receipt of custody of this pet(s) from the Head Butt Hotel.

**Signature Adopter:**

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**Date:**

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**Signature Head Butt Hotel:**

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**Date:**

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