

SOUTH FLORIDA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 24560 SW 167 Avenue, Homestead,FL 33031 Phone/Fax: 305-825-8826 www.helpthehorses.org

	ADOPTION A	GREEMENI	
Recipient's Last Name: _		First Name:	
Home Address:		City:	ST:
Zip Code:	_ Home Phone:	Cell Phone:	
Email Address:			
Drivers License #:		_ Equine Name:	
Description of Equine:			
	TERMS AND CONDITIONS OF	F PLACEMENT OF EQUINE	
		e (hereinafter "RECIPIENT"), and South PCA"), is governed by the Terms and C	
RECIPIENT/OWNER AGRE	ES:		
 To ensure the Equine receits To ensure the Equine is alway jurisdiction in which the Equine in Section 1. To permit South Florida SP inspections of the facilities Not to remove the Equine in To notify South Florida SPC Never to transfer possessic written consent of South Florida SPC To hereby assume full and or control; and (b) any dama responsibility for the proper in the event it is determined and/or the RECIPIENT/OW the South Florida SPCA the affect said repossession. Not to breed the Equine, or SPCA repossessing the Equine, or the South Florida SPCA reposed in SPCA rep	vays treated with kindness, affection unine resides. CA and/or any humane organization and condition in which the Equine is rom the state of Florida without obta CA of any changes in residency of Rion and/or custody of the Equine to an orida SPCA. legal responsibility for (a) the Equine may cause or any cause or care and maintenance of the Equine dby South Florida SPCA that the Equine or injury the Equine may cause or cause to repossess the Equine, including to repossess the Equine, including the Equine of the Equine or cause to be bred, for any reason where the Equine of the Equine as of the Equine of the Equine as of	ining prior written consent of South Flo ECIPIENT within thirty (30) days of such person or entity for any reason what while the Equine is in the RECIPIENT. RECIPIENT/OWNER further assumes e. The prior of this Agreement, the RECIPIENT/OWIGHT of the RECIPIENT with the right to enter the RECIPIENT hatsoever. Failure to comply will result any circumstances, whatsoever. Failure	cruelty laws of the or make periodic rida SPCA. The change of address. Its oever without the prior rown of the prior row
i.		IT, certify I have not been charge o	
	als, that I have adequate facilities	es and the ability to care for the Eq true and correct to the best of my l	uine, that I am of lega
Date		Agent for South Florida SPCA ((Print Name)
RECIPIENTS Signature		Agent for South Florida SPCA ((Signature)

Witness (Signature)

Location of Equine

Witness (Print Name)