

Dalin Show Kennels

135 Calvary Church Rd.
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ADOPTION AGREEMENT

This agreement is entered into this _____ day of _____, 20____ between Lynn K. DeRosa and _____ . The adoption of a (male/female) poodle, DOB _____, of _____ color, _____ Size, Sired by _____ ex Dam _____ recognized by Litter P _____ is being adopted as a (Show--Pet) Pet poodles will receive only limited registration when proof from veterinarian is received for neutering or spaying. Male pets can have two, one or no descended testicles that should be removed.

This puppy's health is guaranteed to be good to the best of our knowledge at the time of adoption. The new parents have 10 days to have a health check performed. If the vet finds anything *seriously* wrong, we will give a full refund or an exchange puppy of equal value, when available, provided a letter stating the puppy's illness is received and the puppy is returned within the guaranteed time.

Dalin Kennels assumes no responsibility of this puppy after leaving the premises, medical expenses, mortality, landlord's disapproval, allergy to animals, disagreement of family, or for any other reason. It is further understood and agreed that no warranty or representation has been made with respect to said puppy, except as set forth in writing in this agreement. If ill health becomes an issue and you can no longer care for this puppy, we will help to look for a new home and when relocated, a 50% refund will be given, minus costs and boarding. All necessary transfer papers of said puppy will be required.

It is agreed and understood that this puppy has NOT been purchased for resale or for use by any wholesale operation. It is further agreed that the puppy WILL NOT be resold to any pet shop, dog farm, wholesaler or agent for same for any reason whatsoever. It is further agreed that all efforts will be made to prevent any offspring of this puppy from being sold to such parties.

Health history is included. Further conditions are:

Adoption fee \$ _____.

In agreement we are:

DALIN SHOW KENNELS

Lynn K. DeRosa

Name _____
New Parent/s

Address _____

Phone _____

Email _____