

ANIMAL ADOPTION RECORD UNIVERSITY OF WISCONSIN-WHITewater

1. I accept the adoption of the animal described below from the University of Wisconsin-Whitewater. I agree with IACUC's assessment that the animal is in good health. I do understand, however, that there are no expressed or implied guarantees relative to the health or temperament of the animal.
2. I accept responsibility for the care of the animal described below and will make every reasonable attempt to care for this animal in a manner that is generally considered appropriate for a pet of this species.
3. The animal described below is to be a pet for my immediate family and myself. I understand that it is not to be sold, given away, or otherwise released from my care unless extreme circumstances require the same. If the animal described below must be released from my care, I will make every attempt to secure a satisfactory home environment for it.
4. I assume responsibility and agree to hold harmless from liability the IACUC, the University of Wisconsin-Whitewater or its agents, for any claim that may arise from the adoption of the animal described below.
5. I have read and understand the foregoing and voluntarily sign this Animal Adoption Record with full knowledge of its significance.

Species

Breed or Type

Identifying Marks/Tattoo number/Color

Sex

Age

Weight

Vaccination History of Animal

Medical/Behavioral Information

Name (Print)

Address

Telephone

Signature and Date

PI Signature and Date

IACUC Signature and Date
