

PETS ALIVE ** FlortdaPetsAllivery:** Pet Rehoming Program Agreement rev 4/30/2018 (Name of Pet)	
(My Name)	
(Address where Pet will be home	ed)
	Zip Code
Email	
Cell Number	Home Number
I agree to continue to Home and	Vet my Pet until the Pet is adopted. (Please Initial)
I will email to you the Pets curre	nt Vet Records <mark>. (Please initial)</mark>
Florida Pets Alive Inc. (FPA	A) will assist to rehome my Pet by marketing my Pet:
 Posting on their Web 	Site <u>www.floridapetsalive.org</u>
 Posting on their Pet search?shelter_id=F 	Finder Page https://www.petfinder.com/pet- L1309
 Posting on their Face 	ebook Page with over 4,000 FB Friends.
whole body would be preferred) a Pet ASAP. Please include inform age, spay/neutered fully vetted, a background screening as well as will collect their regular Pet Adogo (Please Initial)	f my Pet (at least one close up of his/her face and one of the and a short paragraph of information so FPA can help rehome my ation on personality, favorite things, breed, sex, weight, approx. etc. FPA will process any/all Applications for my Pet including a perform a Home Visit with the potential adopter and my pet. FPA otion Fee for providing these services from the new adopter.
l agree to the terms and condition	ns of this Agreement:
Signature:	Date: