The Alpha Project



Veteran Adoption Form

PLEASE PRINT CLEARLY

name:	
Address:	
Phone (1):	Phone (2):
Email:	
 I understand it is my reschoose to adopt. I understand that the home I declare that I am adopt I understand that this is 	eand agree to the following terms listed below: sponsibility to provide all medical care, food and supplies for the dog I ealth and the behavior of the dog are not guaranteed. oting this dog for personal companionship. s NOT a trained service dog, nor will I portray it as one. s will I hold the Sandusky County Dog Kennel liable for any problem pose to adopt.
Signature:	Date:
the sponsors and community m showing our supporters that yo adoption fee. Your signature be is NOT mandatory to agree to p	o have a picture of you and the dog you adopt to be able to share with embers on our website and social media accounts for the purpose of u participated in the program and their donations were used to pay the elow authorizes us to use your photo in various Public Relation venues. It rovide a picture for be considered for participation in The Alpha Project.
If you have children, The Alpha and ours, this is our way of prot	picture of the new dog as we understand some people are camera shy. Project will not post a picture of your children's faces. You protected us tecting yours. We will post (please check your preference): g Yourself, Your Family & Dog
Signature:	Date: