



ST. LUCIE COUNTY PET FRIENDLY SHELTER RULES/AGREEMENT

Your safety and the safety of your pet(s) is our primary concern. Only dogs and cats are accepted for sheltering. All Public shelters have established rules and the St. Lucie County Pet Friendly shelter is no exception. A law enforcement officer is at each shelter to enforce rules.

Please observe the following at all times:

Observe all posted rules, including the following:

- Do not bring alcohol, illegal substances or non-prescribed medications to the shelter.
- Smoking is permitted only in designated areas.
- No guns or weapons of any kind will be permitted on premises.
- No disorderly or disruptive behavior will be tolerated.

Pet Owner Responsibility:

- You must provide proof of rabies vaccination for your dog or cat.
- Pets are to remain contained in an approved carrier (hard plastic or wire) except at scheduled times. Carriers are required to be large enough to accommodate bedding, food/water bowls and litter pans.
- At least one family member must remain at the shelter at all times while their animal is being sheltered.
- Each pet owner is responsible for assigning one caregiver for animal visitation, walking, cleaning, feeding, and administering medication.
- To avoid gastric upset, pets should be fed their regular diet, water should be changed daily. Pet carriers and their immediate area are expected to be kept neat and clean.
- For safety reasons, always walk on the rubber walkway.

- Dogs should be kept on a short leash at all times when out of their carrier. Retractable leashes are discouraged.
- Dogs are to be walked in designated areas only and owners are expected to use waste bags (provided). There are designated disposal areas for waste.
- Pets and carriers must maintain proper identification.
- Pet owners are responsible for any items brought to the shelter for themselves and or/their pet(s) and will not hold shelter staff responsible for items left behind.
- Upon exiting the shelter after the event, the pet owner will make sure the area around their pet is clean of spilled food, free of pet waste, and litter pans emptied in provided receptacles.

Courtesy:

- Give your neighbor enough space to clean their pet's carrier.
- Do not put your fingers or hands in any pet carrier other than your own.
- Do not allow children under the age of 16 in the animal housing area without being accompanied by an adult.

Animal Health:

- Pet owners will permit their pet(s) to be examined by qualified animal shelter personnel if their pet is showing significant signs of illness and/or distress.
- I certify that my pet(s) is current on rabies vaccination and will provide proof of same. I further certify that I will consult with my individual veterinary health care provider for recommendations about the use of additional vaccines that will provide the optimal immunity against contagious disease.
- I understand that the staff will use all reasonable precautions to prevent injury, exposure to disease or illness to my pet. Emergencies can and do happen, particularly in a stressful and unfamiliar environment. Although unlikely, my pet may become ill and/or injured and staff will take reasonable measures to deal with that illness and/or injury to the extent possible. I agree that any emergency medical care required for my pet will be at my expense.
- If a pet shows signs of contagious disease, is infested by parasites (fleas, ticks, lice, etc.) or begins showing signs of stress-related conditions, it may be removed to a more appropriate location as determined by the animal handler.

Notes:

- Failure to comply with these rules may result in the removal of my pet(s) to another location.
- If my pet displays behavior deemed dangerous to the welfare of others (human or animal) or shows evidence of infectious disease, shelter personnel have the discretion to transfer my pet to a more appropriate location for quarantine or isolation.

Owners signature: _____ Date: _____

Owner name in print: _____

Driver's License #: _____ State: _____

Shelter representative signature: _____ Date: _____

Shelter representative name in print: _____

SAMPLE