

FERAL CAT STERILIZATION PROGRAM  
AGREEMENT/LIABILITY RELEASE  
FOR CAT COLONY CARETAKERS

This service is provided to help reasonably healthy un-socialized feral and free roaming homeless cats (not owned to our knowledge) that are expected to be returned to the colony and otherwise would not be sterilized. Cats/kittens must be at least three (3) lbs. The veterinarian performing the sterilization will make the final determination regarding all surgeries.

All cats/kittens admitted will be altered, given a rabies vaccine, and parasite medication. All cats/kittens will be ear tipped for altered identification. (No exceptions) Any other services performed on the animals will be the financial responsibility of the caretaker.

Feral cats face risks during handling, anesthesia and surgery. Save a Kitty Feral Cat Program, Inc., its volunteers or any participating facilities (Veterinarians, etc.) will not be held responsible should a cat experience complications, injury, escape or death. Also, as a colony caretaker, I release Save a Kitty Feral Cat Program, Inc. from any incidents arising from handling feral cats/kittens, that I may incur



while trapping, transporting or caring for these cats.

The attending veterinarian (at their discretion) will humanely euthanize any cat/kitten found to be severely ill or injured or have a medical condition that would make it inhumane to release the cat. Every effort will be made to contact the caretaker before euthanizing a cat but the time limits associated with a feral spay/neuter program are recognized.

I agree to return to pick up the listed feral cats (or have a designated agent pick them up) at the specified time.

I promise to see that all cats released following surgery will receive food, water and necessary care on a regular basis when they are returned to the location from which they were taken and I acknowledge the possibility that once released some cats may not return.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

DAY PHONE \_\_\_\_\_ EVENING PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

SPECIFIC LOCATION OF CAT COLONIES \_\_\_\_\_

NUMBER OF CATS CURRENTLY IN COLONY \_\_\_\_\_

ACKNOWLEDGEMENT/SIGNATURE OF CARETAKER \_\_\_\_\_

I agree to indemnify and hold harmless the Save a Kitty Feral Cat Program, Inc., its officers, agents, volunteers and anyone associated from and against any and all liability arising out of any service provided.