



## LIABILITY RELEASE/AGREEMENT

This service is provided to help reasonably healthy un-socialized feral and free roaming cats (**not owned to our knowledge**) that are expected to be returned to a 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/FVRCP vaccine. **All cats/kittens will be ear tipped for identification (No exceptions).** Any other service 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 severely 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 recuperation 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. I will provide updated colony information to Save a Kitty FCP on a continual basis (twice per year) to assist in population statistics.

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, veterinarians, volunteers and anyone associated from and against any and all liability arising out of any service provided.