



SPAY / NEUTER and VACCINE CONTRACT

As a condition of the adoption of _____ (dog's name and ID #):

- 1) I agree to make a spay/neuter deposit in the amount of \$200 in addition to the adoption fee.
- 2) I promise to have the dog spayed/neutered before the age of 6 months, but no later than _____ (date). I will notify Fetchin' Retrievers Rescue with the scheduled date of surgery and understand that, once I provide FRR with a copy of the spay/neuter certificate, the deposit can be returned to me. If proof of the puppy being spayed/neutered is not provided by _____ (date), I agree that the deposit will not be refunded to me.
- 3) I agree to have all puppy vaccines completed per the schedule below. The first set of puppy vaccines was given on _____ (date), paid for by FRR.

Subsequent vaccines should be given at 3-4 week intervals, paid for by the adopter.

2nd set no later than: _____ (date)

3rd set no later than: _____ (date)

4th set no later than: _____ (date)

I will consult with my veterinarian to determine the best time to administer a rabies vaccine. I will pay for the rabies vaccination and will provide FRR with a copy of the Rabies Certificate.

Authorized Veterinary Clinic:

The cost of the spay/neuter will be included in the adoption fee if the procedure is performed no later than _____ (date) at the following veterinary clinic:

Name of Veterinary Clinic: _____

Address: _____

Phone number: _(_____) _____

Veterinary clinics are very busy and you need to make the appointment well in advance in order to meet the date listed above.

If you prefer to use your own veterinary clinic, you will need to pay their fee in total and we will reimburse you for \$100 of the fee upon receiving documentation that the surgery was completed by _____ (date). This would be in addition to the Spay/Neuter Deposit refund as outlined above.

Further Conditions:

When signing in at the Authorized Veterinary Clinic, the sign in name is **FETCHIN' RETRIEVERS RESCUE** and **THE ORIGINAL RESCUE NAME OF THE PUPPY EVEN IF YOU HAVE CHOSEN A NEW NAME**. This is for our records in addition to not complicating the records at the animal hospital.



My signature indicates that I have received a copy of this contract and understand that if I do not comply with the conditions of this Spay/Neuter and Vaccine Contract, Fetchin' Retrievers Rescue can reclaim the dog I have adopted.

Adopter's signature: _____

Print name: _____ Date: _____

Witnessed by Representative of FRR: _____