

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 an promise to have him/her spayed/neutered once he but no later than (date). I will scheduled date of surgery and understand that, or ter certificate, my deposit will be returned to me. I provided by (date), I agree that	e/she is 4 months of age (date), notify Fetchin' Retrievers Rescue with the nce I provide FRR with a copy of the spay/neuf proof of the dog being spayed/neutered is not
I agree to have all puppy vaccines completed p vaccines was given on	
Subsequent vaccines-should be given at 4-week i	ntervals, paid for by the adopter.
2 nd set no later than:	(date)
3 rd set no later than:	(date)
I will consult with my veterinarian to determine the pay for the rabies vaccination and will provide FRI	
Authorized Veterinary Clinic: The cost of the spay/neuter will be included in the adoption	on fee if the procedure is done at:
Name of Veterinary Clinic:	
Address:	
Phone number: _()	
Further Conditions: When signing in at the designated Veterinary Clinic, the s OF THE PUPPY REGARDLESS IF YOU HAVE RENAM to not complicating the records at the animal hospital.	
My signature indicates I have received a copy of this comply with the conditions of this Spay/Neuter and V have adopted.	contract and that I understand if I do not accine Contract, FRR can reclaim the dog I
Adopter's signature:	
Print name:	Date:
Witnessed by Representative of FRR:	