



Community Cat Program Surgery Agreement

Caretaker/Patient Info: _____ **Date of Drop-Off:** ____/____/____

Last Name: _____ **First Name:** _____

Address: _____ **City:** _____ **Zip:** _____

Daytime/Cell Phone: _____ **Email:** _____

Emergency Contact (Name and Daytime Phone): _____

Feline Identification:

1) _____ 2) _____

3) _____ 4) _____

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Carefully read and initial the following before signing your name.

_____ I, acting as owner of the animal, hereby request/authorize the HSNEGA, through such veterinarians, to perform surgery for the sexual sterilization of the animal identified above.

_____ I understand surgery includes inherent risks up to and including possible injury or death of this animal resulting from the procedure and the use of anesthetics and drugs used in providing this service.

_____ I understand if I fail to retrieve the animal at the agreed upon release time, I will be charged a boarding fee of up to \$20 per night.

_____ I understand the animal will receive an **EAR TIP** and small tattoo on his/her underside to show she/he has been sterilized.

_____ I understand all felines presented through the Community Cat Program also will receive a Rabies and FVRCP vaccination after surgery.

_____ I understand HSNEGA is operating only as a surgical clinic and is unable to provide or be held liable for, any post-surgical complications or issues.

_____ I hereby release the HSNEGA, the veterinarians, the assistants and all of its officers, directors, employees, and volunteers from any and all claims arising out of or connected with the performance of this surgery or any adverse reactions resulting from other procedures.

_____ I understand that I, as the caretaker, am assuming responsibility for the post-operative care of this cat. Male cats must be monitored in a quiet, warm, dry location overnight and released in their original location the following morning. Female cats must be held overnight in a quiet, warm, dry location overnight and will be released the following evening.

_____ I understand that I, as the caretaker, need to provide appropriate nutrients (wet food or dry food and water) to any cat in my possession longer than 24 hours.

Signature: _____ **Date:** ____/____/____
(Authorized Agent)



What You Need to Know about the Community Cat Program for Hall County

The Community Cat Program (CCP) is a collaboration between Hall County Animal Services (HCAS), the Humane Society of Northeast Georgia (HSNEGA) and Best Friends Animal Society (BFAS) along with other community organizations. The goal of the program is to reduce the number of undomesticated/feral cats entering the Hall County shelter system while, in turn, increasing the live release numbers for undomesticated/feral cats through free/low-cost spay/neuter.

TRAPS FOR CATS: HCAS will be lending live/humane traps to Hall County residents on a first-come basis at no charge. Residents borrowing traps must present a driver's license or other current photo ID with current Hall County address. Traps are available to pick up Tuesday-Saturday 9 am- 5 pm. **Please call or email Sherry Mililli, the CCP Coordinator, at SMililli@HallCounty.org or 770-531-6832 to reserve a trap in advance.** Tractor Supply also sells live/humane traps for approximately \$35 each.

SURGERY FOR CATS: Through a grant from Best Friends, HSNEGA is offering a **limited number of FREE spay/neuter surgeries for CCP cats on a first-come basis.** Surgery for CCP cats will be Tuesday-Thursday (no surgeries on Friday). **Cats MUST be presented for surgery in a live/humane trap** (see above for info on traps). No more than two cats per household will be taken in at one time. If you have more than two cats for surgery, please contact HSNEGA's spay/neuter office at SpayNeuter@HSNEGA.org or 770-532-6617, ext. 250 to coordinate intake for surgery.

DAY OF SURGERY: Trapped cats **MUST arrive at 8 am at HSNEGA.** If cats arrive at other times, they can be housed overnight, however, the person dropping off will be charged a \$10 boarding fee, per night, per cat. **Cats MUST be picked up at 4:30 pm the day of surgery.**

The cat caretaker also must complete the form on the other side of this page and agree to the terms outlined. Please feel free to complete the information in advance and bring with you the day of surgery. Additional forms can be downloaded and printed from the HSNEGA website at www.HSNEGA.org.

ADDITIONAL INFORMATION: Questions about the Community Cat Program for Hall County? Please contact Sherry Mililli, the CCP Coordinator, at SMililli@HallCounty.org or 770-531-6832. Please note that due to the anticipated volume of calls, it may take several days for your inquiry to be answered.