



Farm, Feral & Stray

www.facebook.com/farmferalstray



Caregiver Agreement:

Name: _____ Cell Phone: _____

Home Phone: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Colony Information:

Address or Intersection: _____ City: _____

I understand that as part of my participation in the Farm, Feral & Stray Program, I agree that...

-I will only trap cats for Trap Neuter Return (TNR), or for other required veterinary attention. I will not use the trap(s) to capture any cat with a home; to capture a healthy animal to be killed or turned over the animal control or the shelter; for any unlawful purpose; or to capture any cat for research/testing purposes for profit or otherwise.

-I will immediately release any wildlife trapped in the area in which it was trapped.

-I am responsible for ensuring that the cats I trap are kept safe from weather, people, and other animals while in the trap; and that they receive food, water, and necessary care while caged and after release.

-All cats accepted into the Farm, Feral, & Stray Program receive a spay or neuter surgery, rabies vaccination and **mandatory ear tipping**. These services are provided by a participating veterinarian once a Caregiver agreement is signed. Any and all other services required by the veterinarian or requested by me will be my responsibility, including, but not limited to, flea treatments, ear mite treatments, in-heat or pregnancy surcharges, vaccinations, testing, boarding, and euthanasia.

-In some cases it may be necessary to euthanize cats whose physical conditions may prevent them from being able to have a quality life. Or, in the case of pregnant cats, it may be necessary to euthanize unborn kittens. This decision will be made by the Farm, Feral & Stray supervisor in conjunction with their participating veterinarians. I agree that I will not hold Farm, Feral & Stray or the participating veterinarian(s) liable or responsible for this decision or their actions.

-I will hold Farm Feral & Stray harmless if I am injured while trapping or capturing any cat. In the event I, or anyone else, is bitten, the law requires a 10-day quarantine period, the cost of which will be my responsibility.

-If I am not able to personally trap the cats in my care I give permission for FFS to enter my property to do so.

-I will notify Farm Feral & Stray of any new additions to the colony and agree to schedule Trap Neuter Return (TNR) services immediately.

-I will notify Farm Feral & Stray if I am unable to continue caring for this colony so other care arrangements can be made, or relocation facilities will be secured.

Signature

Date

Please remember that all of Farm Feral & Stray participating veterinarians have active, for-profit practices, and generously give of their time based upon their commitment to ending the problem of pet overpopulation. They deserve respect and courtesy as they do their best to adjust their regular schedules to accommodate trapped ferals.

Farm, Feral & Stray

Feral Cat Information (additional room on back of form):

Cat #1:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #2:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #3:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #4:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #5:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #6:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #7:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #8:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #9:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Cat #10:

Color: _____

Sex (circle one): male female unknown

Fur Length (circle one): short medium long

Estimated Age: _____

Farm, Feral & Stray

Date: _____

Caregiver: _____

Please complete the form below to make a donation to Farm, Feral & Stray for the value of each of your cats services. The average cost to FFS for altering and vaccinating each cat is \$70. If you are able to make a donation in that amount we would be able to refer you to a vet as soon as an appointment is available. If not, we will help supplement your donation and will contact you when we have raised the additional dollars. Thank you.

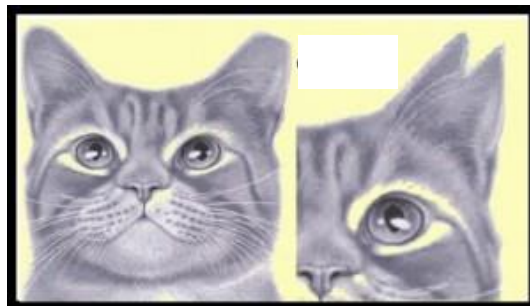
Type of payment:

Cash: _____

Check: _____ Make payment to Farm, Feral & Stray, 2099 190th St, Centuria, WI 54824

Signature: _____

Received by: _____



This is an example of what an ear tip on your cats will look like. All outdoor cats will receive an ear tip for identification purposes.

Any changes to this policy must be agreed upon with an FFS director.