

Mitchell Animal Rescue

STRAY & FERAL ADOPTION FORM

By filling out the following form you will be agreeing to adopt a stray or feral cat that has come through Mitchell Animal Rescues (MAR) Trap Neuter Release (TNR) program. In doing so, you are saving a life who would have otherwise been euthanized or lived a hard, short life on the streets in an endless reproductive cycle. Upon adoption, your feline will have been tested for Feline Leukemia and Feline Immunodeficiency Virus, given a three-year rabies vaccine, spayed or neutered, and tattooed in the right ear for identification purposes.

The time at which your adoption will take place will be unknown. Once your form is completed and handed-in, you will be placed on an adoption list. As cats come through the program we will adopt them out using the criteria we received in your form to best place each cat. You will be given a heads up when your time is close. **Be prepared**, for once the animal is trapped you will be notified and arrangements for pick up or delivery will need to take place that day. Due to the nature of the animals involved in the program they will not be allowed to come out of the trap or carrier in an awake state. The animal will be completely dependent on your word to take possession that day for their well-being. These animals cannot stay at the vet or be released in city limits. All feral cats will need to be picked up at Creekside or Lakeview veterinary clinics.

If you will be adopting a stray or feral kitten, vet work may include virus testing, up to date vaccinations, and treatment for fleas, worms, and ear mites if needed. Kittens will be spayed/neutered at 16 weeks. If you adopt prior to this age, you will be required to spay or neuter you kitten your own expense. All info on kittens will be presented at time of adoption. Kittens will not be tattooed. There will be an adoption fee for all indoor kittens. All kittens are to be adopted as indoor pets only.

Name _____ Phone _____

Address _____ Phone _____

Email _____

Place of employment _____

Do you live outside city limits Yes or No

Do you rent or own your property? _____

If renting, landlords name and phone number

What type of shelter will you provide? _____

Will your shelter be heated? Yes or No

Do you prefer (circle one) **tame cats** **feral cats** **either**

Will you be adopting a (circle one) **kitten** or **adult cat**

Please explain what you are looking for in your adopted animal?
(example... friendly farm pet, pest control, just wanted to save a life)

How many cats are you interested in adopting? _____

Only fill out this section if you are interested in adopting a pregnant stray or feral

If during the spay process we find the feline to be pregnant we will not follow through with the spay procedure. By signing below in this section you agree to adopt a pregnant animal and care for its young until MAR is able to step in and adopt out the young. At that point an attempt to re-trap the mother will be made in order to proceed with the alteration to prevent further unwanted kittens.

I Am Aware that MAR will not guarantee their ability to be able to re-trap the mother IN _____

I Agree to allow MAR to adopt out the offspring from the pregnant animal I have adopted if I am unable to keep or rehome the kittens myself. IN _____

Signature _____

Date _____

Please initial behind each statement

I Agree to provide shelter, food, water, and continued care for the animal above. IN _____

I Am Aware that this animal may have been recently spayed/neutered and vaccinated. In rare cases, complications from these procedures may arise. If so, I will contact Mitchell Animal Rescue and report my concerns. MAR does not guarantee the health of the animal. IN _____

I Agree to adopt the animal "As Is." All information on the animal will be provided at the time of adoption. In rare cases some of the animals may not get the opportunity to have vet work done due to the given situation and inability to handle the animal. I am responsible for knowing what I am adopting and providing all future care. IN _____

I Agree to release the animal in an enclosed area where he/she will be protected from other animals for the first 48 hours to allow the animal to safely recover from his/her alteration. IN _____

I Am Aware that cats are extremely territorial animals and if released into a new area may try to return to the area in which it was trapped. I will notify Mitchell Animal Rescue if I can no longer locate the animal I have adopted. IN _____

I Am Aware that I am adopting a stray or feral animal. In most cases these animals have had limited interaction with humans and will not be tame. The history and temperament of the animal may be unknown IN _____

I Agree to contact Mitchell Animal Rescue if circumstances change and I am no longer able to care for the animal above. I will also contact the rescue if the animal's health becomes jeopardized or the animal becomes deceased. IN _____

I Agree to promptly return the carrier if any in which my animal went home in to for it is property of MAR and will need to be used for the next adoption. Return carriers to the same location at which you picked up your cat at. IN _____

I Agree If adopting an unaltered kitten to spay/neuter when of age to support the goal of reducing unwanted animals. In _____

I Am Aware that Mitchell Animal Rescue is a non-profit organization dedicated to the protection and care of animals, as well as the reduction of unwanted and homeless pets. IN _____

I, (print full name:) _____ agree now and at all times in the future to waive any and all claims of liability, whether of negligence or any other cause of action, against Mitchell Animal Rescue, its directors, officers, employees and all volunteers working under its supervision for any of the following: any personal injury, property damage or any other type of harm, resulting from my participation in any and all activities I engage in under the supervision of Mitchell Animal Rescue, its directors, officers, employees, and volunteers. These activities include, but are not limited to, the trapping, handling, caretaking and transporting of feral and stray cats, and the handling or use of equipment related to trapping, handling, caretaking and transporting stray and feral cats.

I understand that the involvement and participation of Mitchell Animal Rescue, its directors, officers, employees and volunteers under its supervision, is contingent upon my agreeing to this waiver.

IN SIGNING THIS WAIVER, I ACKNOWLEDGE THAT FERAL AND STRAY CATS ARE WILD ANIMALS, CAN BE UNPREDICTABLE IN THEIR BEHAVIOR AND ARE CAPABLE OF INFLICTING SERIOUS BODILY INJURY, AND I WILLINGLY ASSUME THIS RISK.

Signature _____

Date _____

Print name _____

Contributions are welcome and greatly appreciated. Donation checks can be made out to Mitchell Animal Rescue and turned in with you adoption form. All TNR donations will go towards veterinary care.

Remit to: 801 Williams Ave Mitchell, SD 57301, robyn.jsupplies@gmail.com, or MAR representative

Signature of Mitchell Animal Rescue Representative

Date _____

To be filled out by administration

Cat ID _____ Sex M or F Color _____

Markings _____

Cat ID _____ Sex M or F Color _____

Markings _____

Cat ID _____ Sex M or F Color _____

Markings _____

Cat ID _____ Sex M or F Color _____

Markings _____