

TNR FELINE

Owner Information:

First: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Animal Information:

Cat name (can leave blank): _____ Cat 2 name: _____

Trapped in Washtenaw County, Plymouth or Northville City? ☐ Yes ☐ No

Cat 1 color / description: _____ / _____

Cat 2 color / description: _____ / _____

Any health concerns?(see asterisks below for pricing): _____

Are these cat/s exhibiting any social behaviors? (TNR is only for unsocial, outdoor cats who CANNOT be handled, but we understand there are unique situations) ☐ Yes ☐ No

If yes, would you like for the cat/s to be assessed for adoption? (due to shelter volume constraints there is no guarantee we can intake cats) ☐ Yes ☐ No

In County

- TNR in county package – S/N, rabies, FVRCP, flea and tick treatment \$40 ☐
- Dewormer – \$10 ☐
- Microchip – \$30 ☐
- *Basic wound repair, clean wound site / antibiotic injection – \$50 ☐
- *Wound / injury repair tier 2, x-rays, tail removal, eye removal, pain meds – \$150 ☐
- *Wound / injury repair tier 3, x – rays, limb removal, sutures, pain meds – \$300 ☐
- *Tier 2 & 3 wound repairs may require a 2 week recovery period in a dog crate, do you have the ability to provide this? Yes ☐ No ☐

Out of County

- TNR out of County package – S/N, rabies \$75 ☐
- TNR out of County package – S/N, rabies, FVRCP, flea and tick treatment \$90 ☐
- FVRCP combo vax – \$5 ☐
- Flea and tick treatment – \$15 ☐
- Dewormer – \$10 ☐
- Microchip – \$30 ☐
- *Basic wound repair, clean wound site / antibiotic injection – \$50 ☐
- *Wound / injury repair tier 2, x-rays, tail removal, eye removal, pain meds – \$150 ☐
- *Wound / injury repair tier 3, x – rays, limb removal, sutures, pain meds – \$300 ☐



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TNR Responsibility Agreement, Liability Waiver and Surgery Consent

The HSHV Community Cat program is a community program designed to humanely reduce outdoor, unsocialized cat populations over time.

I am aware of and agree to the following HSHV terms and policies:

1. I agree to pay for sterilization upon drop-off the cat/s
 - o Cat(s) will be spayed/neutered
 - If already sterilized, fee will go toward anesthesia/vaccine costs and will not be refunded
 - o Cat(s) will be ear tipped, no exceptions (included in surgery cost)
 - o Cat(s) will receive rabies vaccine (included in surgery cost)
 - o Additional services are available at an additional cost
2. I understand cats' bellies are shaved during TNR, and that it takes 2-3 months for the fur to grow back. I understand that in winter months (November through March), it would be cruel and dangerous to keep a newly sterilized cat outside without shelter, and I confirm that I am providing a dry, covered shelter for any cat I bring in for TNR to recover in until their fur grows back.
3. I understand the cat must be brought in and shall remain in a live trap while at HSHV to maximize safety for the cat and for HSHV staff. Any cat not brought in an individual live trap will be charged a transfer fee.
4. I understand that there is some risk of injury or death in the procedure and the use of anesthetics and drugs. If the cat is pregnant at the time of surgery, I understand that pregnancy will be terminated.
5. I agree that any cat who is medically untreatable or in severe or chronic pain will be humanely euthanized at the veterinarian's discretion while the cat is under anesthesia. I understand I will be notified post-euthanasia.
6. I understand that if a bite occurs during the cat's stay, HSHV will follow Washtenaw County's public health Rabies protocol.
7. I agree to pick the cat up the day after surgery is performed and return the cat to the location it was trapped for release. If cat(s) are left here more than 24 hours, post-surgery, you will be charged \$40 for boarding each additional day and lose TNR privileges through HSHV.
8. I understand that if my cat is able to be safely handled, I will have to schedule an outpatient appointment through the clinic.
9. I agree if I elect for an assessment and the cat passes and is in the HSHV service area, HSHV will take ownership of the cat for adoption.
10. I understand that if I am unable to be reached at the phone number I have provided that HSHV will proceed with what the veterinarian determines to be in the best interest of the cat and I will be charged accordingly.

By signing this waiver I acknowledge that feral cats are wild animals which can be unpredictable in their behavior and are capable of inflicting serious bodily injury if they are not handled safely. I willingly assume the risk and responsibility of participating in this program. I hereby release the Humane Society of Huron Valley, all veterinarians, assistants, volunteers, directors, and employees from any and all claims arising out of or connected with the performance of this program and procedure or any adverse reactions to vaccinations. I agree that I have not and will not claim any right of compensation from them, or file action by reason of such sterilizations or attempted sterilization of such animal or any consequences related thereto. Caregiver/agent hereby agrees to indemnify and hold the Humane Society of Huron Valley harmless for any damages caused during the transportation of the animal, or for any damages caused by unforeseeable events including fire, vandalism, burglary, extreme weather, natural disasters or other acts of God.

Signature

Print Name

Date