

# **Otter Creek Animal Shelter Spay/ Neuter Agreement**

The purpose of this agreement is to ensure that as adopter(s) we/I will complete the altering surgery for the adopted dog or cat.

**Pets Name** \_\_\_\_\_

**Adoptive Family Name** \_\_\_\_\_

In addition to the Adoption Agreement between the adopter \_\_\_\_\_ and the Otter Creek Animal Shelter the adopter agrees to the following terms:

- 1.) The adopter agrees to neuter/spay the pet by 6 months of age**
- 2.) The adopter agrees to supply Otter Creek Animal Shelter with a veterinarian's letter or other proof that the spay/neuter has been completed.**
- 3.) If the adopter fails to spay/neuter the pet and provide proof to the Otter Creek Animal Shelter by 6 months of age the rights and ownership of this pet will be terminated and revert to the Otter Creek Animal Shelter who may immediately reclaim the pet. The only exception is a letter from a veterinarian stating medical reasons why the altering cannot be performed.**

**I understand and agree to comply with the terms of this agreement.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_