HEAVEN SENT ANIMAL RESCUE NJ SPAY/NEUTER CONTRACT

Adopter's Name:	Breed:
Address:	Approximate DOB:
(H) Phone:	Date of Adoption:
(C) Phone:	Age at Time of Adoption:
E-mail:	Spay/Neuter Must Be Done By:
Pet Name:	

Heaven Sent Animal Rescue NJ participates in the Low Cost Spaying and Neutering Program of NJ. Through this program, you can get your dog spayed or neutered for \$20 at participating veterinarians. Please contact us for more information.

The eligibility requirements are as follows:

1.Dogs must be **LICENSED**, prior to the appointment for surgery, in the municipality in which the owner resides.

2. Written proof of adoption, issued by the adoption referral service, must be presented to the veterinarian.

3. The pet owner must pay a \$20 copayment fee to the veterinarian at the time of appointment of surgery.

4.Pets must be scheduled for surgery within one year from the date of their adoption.

5.Pet owners must certify that they have adopted and own the pet being presented for surgery. A significant penalty may be assessed as the law regulating the program states that, "...any person who knowingly furnishes any licensed veterinarians of this state with inaccurate information concerning the ownership of an animal submitted for animal sterilization procedure shall be subject to a penalty of not more than \$250 for the first offense and not more than \$500 for the second and each subsequent offense..."

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_____, agree to have my new pet,____

I,

spayed/neutered before he/she reaches the **age of six months or within one month from the adoption date**, whichever comes later. I will send proof of spay/neuter surgery to Heaven Sent Animal Rescue NJ within 14 days of the procedure. Failure to do so is considered a breach of contract. As the new owner, I will take financial responsibilities for all my pet's medical requirements.

Signed:	Date:
(Adopter)	
Witness:	Date:
(Heaven Sent Animal Rescue	Representative)

This contract must be printed out, signed and brought with you upon adoption.