

FCHS Representative: _____

Barn Cat Adoption Contract

Name of Animal:		Sex:	Age:	
Breed:	Description:			
l (we), t	he undersigned, understand the following:			
•	The Floyd County Humane Society (FCHS) is made up of volunteers, who receive no compensation for their services rendered to the FCHS.			
•	I understand that all barn cats will be spayed /neutered and receive a rabies vaccine prior to adoption. They may be tested for feline leukemia/FIV and may have received a distemper shot <u>IF</u> that is possible.			
•	I am aware that the rabies vaccination for cats and dogs is required by Virginia state law. I will keep my cat current on its rabies vaccination (booster shot in one year, and then every three years). I agree to keep the cat current on vaccinations to the best of my ability.			
•	I will take my cat to the vet, if possible, throughout its life. I understand that some cat diseases cannot be tested for and/or cannot be vaccinated against, and that FCHS is <u>NOT</u> liable for medical costs associated with an ailment that was undetected in the cat at the time of this adoption.			
•	I agree to allow home visits at the discreti	ion of FCHS.		
•	I agree to keep the cat(s) confined in a cra	ate and/or in a prot	ected area for a minimur	n of 2 weeks.
•	The cat(s) will live on my property, and I will provide them with fresh food and water daily. The cat(s) where constant access to adequate dry shelter inside a barn, stable, dog house, or specifically-designed shelter.			
•	If I do not comply with this contract, or it is discovered that the above cat is not receiving adequate care, the cat in question shall be reclaimed and ownership will revert back to FCHS.			
•	If I ever have to find a new home for my cat, I will notify FCHS. If I am unable to find a new home for my cat, I will relinquish it back to the custody of the FCHS. I will not take it to the pound or to another shelter. am responsible for making arrangements at my expense for said cat until FCHS can arrange for foster car or shelter space. I am also responsible for the expense of returning the animal to FCHS.			
•	I certify that I have never been charged I certify that I have never been charged By signing this contract, I give FCHS the following adoption.	d or convicted of a	a felony.	
Name:((print)		Date:	
Addres	s:			
City	State		Zip Code	
Phone:	(home/cell)			