

**Adopter Spay/Neuter Agreement**

San Antonio Pets Alive requires prompt follow up on all animals leaving unaltered. Adopter has chosen to pay a deposit of $200 and have spay/neuter completed through SAPA! scheduling, or their private Veterinarian at their own cost. Deposit of $200 will be returned to adopter if proof of surgery is provided back to SAPA! within 30 days of adoption.

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**Animal ID: - Animal Name***:* **-**

**By signing this agreement, you agree to the following: (please initial each line item)**

\_\_\_\_\_ I have received medical observations from staff and reasoning for this pet not being able to be altered.

\_\_\_\_\_ I understand that this pet will remain a SAPA! animal until the proof of alter is submitted and adoption is finalized by SAPA!

\_\_\_\_\_ I will provide the necessary treatment through SAPA! medical, while my pet is in foster status (until altered and finalization) for my pet so that they are fit for spay/neuter as advised by SAPA! staff.

\_\_\_\_\_ I will spay/neuter my pet within 30 days; Scheduling surgery with San Antonio Pets Alive! By emailing [schedulemedical@sanantoniopetsalive.org](mailto:schedulemedical@sanantoniopetsalive.org) and including [foster@sanantoniopetsalive.org](mailto:foster@sanantoniopetsalive.org) OR my own private vet and will incur all costs associated.

\_\_\_\_\_ If the surgery date must be extended due to medical reasons, then I will provide vet report if going through my personal vet, or schedule appointments as necessary with SAPA! Marbach clinic for treatment and documentation.

\_\_\_\_\_ I understand that once my pet is altered and the adoption is finalized. I will be accepting full financial responsibility for my pet, including medical, training, other costs associated with pet ownership.

\_\_\_\_\_ I understand that long term follow-up and care will be my responsibility and San Antonio Pets Alive! will not be held liable for care financially or in any other way.

\_\_\_\_\_ I understand that failure to respond/communicate with SAPA! staff or failure to alter and finalize without coordination with SAPA! staff will result in the pet being reported as stolen.

**Reason for leaving unaltered:**

*Reason:* **-**

*SX deadline date* **-**

**Surgery must be completed within 30 days of adoption to get refunded the $200 deposit.**

**\*** **if your surgery appt is scheduled within the 30 days due to long vet wait times and you keep the appointment, we will honor the refund of your deposit (even if it runs past the 30 days).**

**Adopter Name Printed:­­­­­­ - Date: -**

**Adopter Signature: -**

**SAPA! Staff Name Print:­­­­­­ - Date: \_\_\_\_\_\_\_\_\_\_\_-**

**SAPA! Staff Signature: -**

**PROOF/DOCUMENTS**

Please ensure that docs include Animal Identifiers: Name, Breed, Color, DOB, Microchip info that match SAPA! records.

We will accept: Computer generated vet surgery notes or a Spay/Neuter certificate. We CANNOT accept handwritten documents.