

OPERATION TOM CAT APPLICATION



MISSION: FREE NEUTERS FOR RED DEER & AREA

CAT

- Cat's Name:
- Age:
- Medical conditions:

*** MALE CATS ONLY MAY APPLY**
 Have a female feline?
 Visit whiskerrescue.com for spay subsidies

OWNER

- Owner's Name:
- Address: City: Postal Code:

INTEL

- Phone Number:
- Email (mandatory):
- **FURTHER INSTRUCTIONS WILL BE E-MAILED TO YOU** (location, date, & time of neuter)

TERMS

- All cats must be tame, easy to handle, and able to travel in a pet carrier or kennel. Cats must travel safely in a pet carrier/kennel, while in a vehicle & when entering or exiting the clinic. The owner of the cat is responsible for the cat's transportation.
- The owner is required to check the cat in at the vet clinic, prior to surgery, & sign waiver forms.

SIGN

- I, _____ (print name), declare that I am living as a low income citizen (making less than \$42,000 per year) and live within Central Alberta. In signing my name I agree to follow the above written terms.
- SIGNATURE _____ DATE: _____

MAIL

- **SEND US YOUR APPLICATION**
- Snail Mail: P.O. Box 27138 Whisker Rescue Society of Alberta, Red Deer, AB, T4N 6X8
- Email: tomcatsnip@gmail.com

NEUTER, VACCINATION, & DEWORMING AT NO CHARGE TO LOW INCOME CAT OWNERS