



Moe Moe's Rescue of the Rockies  
(303)877-9582  
[www.moemoesrescue.com](http://www.moemoesrescue.com)  
moemoesrescue@gmail.com

## Spay/Neuter Contract

Permanent ownership of this dog is contingent upon your compliance with this Addendum. Proof of spay/neuter must be received by MMRR within 90 days from the date of adoption. In the event that the dog's health does not allow this agreement to be honored, MMRR must be provided with a statement from your veterinarian that this dog is not yet in physical or emotional condition for surgery. Based upon the veterinarian's evaluation of this dog the adopter will contact the veterinarian and establish the earliest date that the procedure can be performed. Adopter will notify the MMRR of this amendment in writing, at which time all other conditions of this agreement will apply and be enforced.

This is the responsibility of the adopter, not the veterinarian, to ensure that MMRR has received verification that the surgery has been performed. Failure to comply with this agreement by the date below, unless otherwise agreed to in writing, will be considered a breach of the Contract, and adopter will transport this dog back to MMRR and will not be entitled to a refund.

By my signature below, I agree to have this dog spayed/neutered by no later than \_\_\_\_\_, and I understand that this spay/neuter agreement is an agreement that this dog will not produce a litter of puppies either as purposely bred or by accidental breeding. I also agree that should puppy not be altered that I will return said puppy back to Moe Moe's Rescue of the Rockies with no refund.

Adopter:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone Number (home) :(\_\_\_\_\_) \_\_\_\_\_

(Cell) :(\_\_\_\_\_) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Issuing State: \_\_\_\_\_

**ANIMAL INFORMATION:**

Age: \_\_\_\_\_

Sex: \_\_\_\_\_

Species/Breed: \_\_\_\_\_

General

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MMRR Representative

Signature \_\_\_\_\_

**DEPOSIT COLLECT \$50.00 required thru PACFA**

**DEPOSIT REFUNDED \$ \_\_\_\_\_**

**DATE PROOF WAS PROVIDED: \_\_\_\_\_**