



*Animal Welfare League of Frederick County (AWLFC)  
1202 East Patrick Street, Suite 13A • Frederick, MD 21701*

## **Fixing Frederick's Felines (FFF) Trap/Neuter/Release (TNR) Program Participation Agreement**

Participant Name (printed): \_\_\_\_\_

Phone: Day # \_\_\_\_\_ Evening # \_\_\_\_\_ Cell # \_\_\_\_\_

Email: \_\_\_\_\_ Best Way/Time to Reach You: \_\_\_\_\_

Property Location Where Cat(s) Reside:  
\_\_\_\_\_

As a participant of the FFF program, I understand and agree to the following:

1. On a long-term basis, I agree to provide adequate food, water, shelter, and medical aid for the cat(s) trapped, neutered and returned.
2. I understand that the cat(s) will be spayed/neutered and given rabies and distemper vaccinations. The cat(s) will be ear-tipped (tip of left ear removed), the universal symbol that a feral/semi-feral cat has been spayed/neutered.
3. As with any veterinary treatment and/or surgery, there are associated risks. As a participant, I agree that I will not hold the AWLFC liable for any outcome which results in the loss of an animal.
4. I understand that the traps to be used are the property of the AWLFC and are to be used only for the animals on my site. I understand that AWLFC is a no-kill rescue group, and that the traps are not to be used to take cats to any animal shelter or a veterinarian to be euthanized.
5. I will work with AWLFC to attempt to trap the cats within a reasonable period; otherwise, I will make arrangements with AWLFC to retain the traps or reschedule for another time.
6. The AWLFC works with several veterinarians and clinics to obtain substantially discounted rates for sterilization and vaccinations. Therefore, pricing will be dependent on the clinic that is used. I agree to pre-pay AWLFC a down payment of \$40 per cat. If the agreed upon clinic has a fee greater than \$40, I agree to pay the remaining balance to AWLFC prior to trapping and authorization for veterinary services.
7. This program can only continue if participants agree to pay for the services. I understand that if I request any additional services, I am responsible for payment to the veterinarian at the time the service is rendered. Additional services may include pre-operative blood work, pain medications, and testing for feline leukemia/FIV. I also understand that I will be responsible for any additional charges related to a female cat in heat, pregnant, or lactating, as determined by the veterinarian; I agree to pay the vet directly for these charges.

8. I understand that AWLFC does not test ferals for FIV and FeLV, nor automatically recommend euthanasia because of a positive test result. I understand that, upon my request, AWLFC will offer advice and help confer with the veterinarian as to the best treatment for cats who test positive.

**Participant Signature:**

**Date:**

**Total Number of Cats to TNR:**

**Payment Amount:**

**How many cats are under 5 months of age?**

**Do you need to borrow traps? Yes/No**

**How many?**

**Do you need help with trapping? Yes/No**