



Midshires Welfare & Rescue: Cat Adoption



Mrs Helen Elliott

Treasurer / Membership Secretary
C/O 28 Pinfold
Leicester LE3 2UW
Tel: 0116 289 2076 / 0774 276 3434
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Details of the cat's new owner

| | | | | | |
|----------------|-------|-------------------|-------|------------------|-------|
| Title | _____ | First Name | _____ | Last Name | _____ |
| Address | _____ | | | | |
| | _____ | | | Post Code | _____ |
| e-mail | _____ | | | Telephone | _____ |

Details of the adopted cat

| | | | |
|---------------------------|-------|-----------------------|-------|
| Registered Name | _____ | Pet name | _____ |
| Registration No. | _____ | Micro-chip No. | _____ |
| Gender? | _____ | Colour? | _____ |
| Age? | _____ | Or DOB | _____ |
| Vaccinated? | _____ | Date | _____ |
| Wormed? | _____ | Date | _____ |
| New Vet Name | _____ | New Vet Phone | _____ |
| General Health | _____ | | |
| Any unusual habits | _____ | | |

In consideration of the information having been supplied and a donation given to the Isabel North fund, part of the Midshires Siamese Cat Association, the parties to this agreement hereby agree as follows:

I the undersigned have agreed to take the above cat into my care and fully understand and accept that if for any reason I can no longer properly care for or keep the above cat I must return it to the Midshires Siamese Cat Association who will care for it until such time as a suitable new home can be found.

Also that if the above cat is found to be in a neglected state Midshires Siamese Cat Association reserves the right to reclaim the above cat.

In the event I have to part with the above cat I relinquish all rights to the above cat and it becomes the sole property of the Midshires Siamese Cat Association. I also agree to return all documents.

1. I fully understand the above cat must not be used for breeding.
2. I agree to follow all instructions on feeding given to me.
3. I have read and understood and agree to the above conditions.
4. The information given in this form is true.
5. I am at least 18 years of age.
6. I intend this to be a legally binding contract.

| | | | |
|-----------------|-------|------------------|-------|
| Signed: | _____ | Donation: | _____ |
| Witness: | _____ | Dated: | _____ |