



# Application for Pet Sterilisation

by Cluny Animal Trust

PBO#930039295

Banking Details: Cluny Animal Trust - Std Bank - Bethlehem Branch - Acc No: 035 278 846

**(Please ensure that ALL fields are filled in)**

You have our assurance that NO information will be shared with any other parties, and will be kept in the strictest confidence

OUR PET STERILISATION SERVICES ARE OFFERED IN THE FOLLOWING AREAS: FOURIESBURG, CLARENS, & BETHLEHEM. Arrangements can be made for pets in Ficksburg, Paul Roux, Rosendal, Kestel, QwaQwa and surrounding areas.

Please contact us to confirm your area - [info@clunyanimaltrust.co.za](mailto:info@clunyanimaltrust.co.za)

NAME:

First Name

Surname

CONTACT NUMBER:

Area Code

Phone Number

CONTACT NUMBER 2:

Area Code

Phone Number

ADDRESS:

Street Address

Street Address Line 2

City/Town

Province

Postal Code

EMAIL:

example@example.co.za

## Affordability Statement

- Please note that this is NOT a free service, although under exceptional circumstances a further reduction in fees can be arranged.
- This is, however, a service for which people will be charged no more than they can reasonably afford, and the balance will be subsidised.
- Please note that any amount under R500 per sterilisation is considered as being exceptional circumstances. As a result, this is subject to investigation of your circumstances.
- Under normal circumstances, we do not do in-depth investigations into your finances, but rely on our own observations, and your honesty and integrity.
- Please make sure that you take this into consideration before making an application, as we operate as a PBO with limited means.



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I can afford to pay (select below) for the sterilisation of my pet:

R500

R600

R750

R950

Other

I can afford to pay :

*Please note that any amount under R500 is subject to investigation of your circumstances. Please also note that the commercial rate for pet sterilisation is in excess of R1500*

Kindly explain your circumstances below:

## Your Pet's Information:

Pet's Name:

Dog/Cat:

Male or Female:

Pet's approximate age:

Pet's Breed (if known) or Large/Medium/Small:

Has your Pet had a Litter:  Yes  No

If so, how many:

Has your Pet been vaccinated against Rabies in the last 12 months:  Yes  No

Has your Pet had any vaccinations against any other major diseases?:  Yes  No

If Yes, Please list below:

Has your Pet had any unusual symptoms, or been diagnosed with any disease/condition?:  Yes  No

If Yes, please explain:

Is your Pet currently on any medication  Yes  No

If Yes, please explain:



# Application for Pet Sterilisation

Do You require more than one pet to be sterilised at the same time?

Yes

No

## Indemnity of Cluny Animal Trust

Cluny Animal Trust uses qualified staffing and supervised students of the Dept of Veterinary Science in their final (practical) year at Onderstepoort, and approved materials for all procedures performed. It is important for you to understand that the risk of injury or death, although extremely low, is always present just as it is for humans who undergo surgery. Please ensure that you carefully read and understand the following before signing your name.

- I, Owner, or acting guardian of the pet named above, hereby request and authorise Cluny Animal Trust, through whomever veterinarians they may designate, to perform an operation for sterilisation of the animal named on the above portion of this form.
- I understand that the operation presents some hazards and that injury to or death of such an animal may conceivably result, for there is some risk in the procedure and the use of anaesthetics and drugs in providing this service.
- I either certify that this animal has been vaccinated within one year prior to this date or waive my right to protect this animal by having it vaccinated.
- I understand that it takes up to two weeks for vaccinations to protect this animal.
- I understand the inherent risks of failing to maintain current vaccinations and waive all claims arising out of or connected with the performance of this operation due to such failure.
- I certify that to the best of my knowledge, this animal is in good health, and that all animals over 4 months of age, has had no food or water since 6:00 p.m of the afternoon prior to surgery.
- I understand that Cluny Animal Trust has the right to refuse service to any animal to whom surgery is deemed a health risk.
- I understand that Cluny Animal Trust may not perform a complete physical examination before surgery is undertaken.
- I also understand that this animal will not receive pre-operative blood work and waive my right to have this service performed prior to surgery at a full service veterinarian.
- I understand that some factors significantly increase surgical risk, including but not limited to, pregnancy, heat, and diseases such as Feline Immunodeficiency Virus, Feline Leukaemia, and heartworms.
- I understand that if this animal is pregnant, the pregnancy will be terminated at surgery.
- I understand that if I don't retrieve this animal at the agreed upon time that Cluny Animal Trust will exercise its right to turn the animal over to the nearest humane society or a Cluny Animal Trust approved foster parent.
- I hereby release the Cluny Animal Trust Sterilisation Project, all Veterinarians, assistants, volunteers, directors, and employees from any and all claims arising out of or connected with the performance of this procedure or any adverse reactions from vaccinations.
- I agree that I have not and will not claim any right of compensation from them, or file action by reason of such sterilisation or attempted sterilisation of such animal or any consequences related thereto.
- I also agree to indemnify and hold Cluny Animal Trust harmless for any damages caused during the transportation of the animal, or for any damages caused by any unforeseeable events including fire, vandalism, burglary, extreme weather, natural disasters or acts of God.

(Owner/Guardian will be required to sign this document at the time of handing above named Pet over for sterilisation)

I the undersigned, do hereby acknowledge that I have read and understood the terms and conditions of this indemnity of Cluny Animal Trust and will ensure that this document is signed by myself or an authorised person at the time of handing above named Pet over for sterilisation.

Yes

Signature:

### Please Note:

Due to the fact that this service is subsidised by donations, only one submission per person is accepted within a 30 day period.

Should you require more than one pet sterilised within the 30 day period and ARE able to pay, or there are indeed exceptional circumstances, please contact us via email and we will do our best to assist you as soon as possible.