



## Last Litter Agreement

Revision: 24-05-21

Gladstone PAWS  
PO Box 7139  
KIN KORA QLD 4680  
Phone: 0429 127 950  
info@gladstonepaws.com

### OWNER DETAILS

Person Name \_\_\_\_\_

Person Address \_\_\_\_\_

Email \_\_\_\_\_

Mobile phone \_\_\_\_\_

Person DOB \_\_\_\_\_

### MOTHER ANIMAL

Name \_\_\_\_\_

Species \_\_\_\_\_

Breed \_\_\_\_\_

Age/DOB: \_\_\_\_\_

Colour \_\_\_\_\_

Microchip \_\_\_\_\_

### PUPPIES/KITTENS

Number in litter: \_\_\_\_\_

*The entire litter must be surrendered to qualify for free desexing.*

Please list any treatments given to the litter, and date/s given:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please read carefully:

1. I am the owner of this mother animal and understand I am giving her entire litter to Gladstone PAWS at this time and ownership now rests with Gladstone PAWS.
2. I understand that every effort will be made to foster, vet treat, desex, and adopt every animal to a new home.
3. I understand that I will receive NO PAYMENT under this agreement.
4. I agree to contact Gladstone PAWS **within 2 weeks** of the collection of the litter to arrange with them to sterilise (desex) the mother.
5. I agree that I will make the mother available for **sterilisation within 4 weeks** of the litter collection. This time can be increased if required on veterinary advice.
6. I understand that I will not be charged for the sterilisation of the mother, nor the care or vet treatment of the litter.
7. I agree to transport the mother to Boyne Tannum Vet Clinic at a time convenient to myself, and as arranged between Gladstone PAWS and myself, not more than 4 weeks following collection of the litter.

My signature below certifies my acceptance of all terms and conditions detailed above:

\_\_\_\_\_  
Adopter Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Gladstone PAWS Officer Name

\_\_\_\_\_  
Gladstone PAWS Officer Signature