



**Ruff Luck Dog Rescue**  
**1289 Thornbury Lane**  
**Libertyville, IL 60048**  
**(847) 207-8233**

## Spay/Neuter Agreement for Ruff Luck Dog Rescue

*All dogs adopted from Ruff Luck Dog Rescue must be spayed or neutered unless the procedure is waived by the board of directors.*

Dog's original name: \_\_\_\_\_ Dog's age: \_\_\_\_\_

Description of dog: \_\_\_\_\_

Date of adoption: \_\_\_\_\_

Adopter Name: \_\_\_\_\_ Adopter phone: \_\_\_\_\_

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

### Spay/Neuter agreement:

As the adoptive owner of the above rescued dog, I agree to have this dog neutered or spayed by 6 months of age. If the dog is an unaltered adult, I agree to have the dog neutered or spayed within 60 days of the adoption date. I understand the rescue will cover the cost of the neuter or spay if I agree to use the participating veterinarian for Ruff Luck. I have the option to neuter or spay at my own vet and upon receipt of proof of neuter or spay by Ruff Luck, I will receive a \$50.00 refund. In order to receive this reimbursement, I must send a copy of the dated veterinary bill that reflects the charges for the neuter or spay to:

**Sara Stewart**  
**Ruff Luck Dog Rescue**  
**1289 Thornbury Lane**  
**Libertyville, IL 60048**

Please be sure the dog's name and description is clearly marked on the invoice. Thank you

Adopter's signature/date: \_\_\_\_\_

Ruff Luck Representative: \_\_\_\_\_

*I have reviewed the spay/neuter terms with the above named adopter*