



Heidelberg SPCA

STERILISATION CONTRACT

PLEASE READ CAREFULLY – THIS IS A LEGAL DOCUMENT

1. SHOULD THE ANIMAL BE TAKEN TO ANOTHER VETERINARY HOSPITAL OR CLINIC FOR THIS SURGICAL PROCEDURE WITHOUT THE WRITTEN QUTHORISATION OF THIS SOCIETY, THE OWNER WILL BE RESPONSIBLE FOR THE PAYMENT OF ANY FEES INCURRED.
2. IF THE ANIMAL IS NOT STERILIZED ON THE DUE DATE MENTIONED ABOVE, **THE SOCIETY RESERVES THE RIGHT TO CONFISCATE THE ANIMAL AND NO MONEY WILL BE REFUNDED.** THE OWNER AGREES THAT A MEMBER OF THE SPCA'S STAFF MAY ENTER UPON THEIR PREMISES IN ORDER TO REMOVE AND/OR INSPECT THE ANIMAL.
3. THE ANIMAL CANNOT BE PASSED ON TO A NEW OWNER. THE ORIGINAL STERILIZATION CONTRACT WILL BE CANCELLED AND A NEW ONE ISSUED IN THE NEW OWNER'S NAME FREE OF CHARGE.
4. IN THE EVENT OF THE ANIMAL'S DEATH, PROOF MUST BE SUBMITTED TO THE SOCIETY WITHIN SEVEN (7) DAYS.

I HAVE READ AND FULLY UNDERSTAND THE CONDITIONS ABOVE, WHICH I ACCEPT UNCONDITIONALLY.

CONTRACT NO. 005/06/2026 DATE: 15/06/2026

BETWEEN
HEIDELBERG SPCA

AND

NAME AND SURNAME: JJ WOLFHERRNS

ADDRESS: 88 VLB WESTHUIZEN STREET, HEIDELBERG.

CELL: 061 988 1230 ALTERNATIVE NUMBER: _____

TO HAVE SPAYED / NEUTERED.

ANIMAL'S NAME: _____ SEX: M AGE: 6 MONTHS

DESCRIPTION: DSH SIAMESE

ON DATE: 15.06.2026.

ADMISSION NUMBER: AHAD 14194

ON THE UNDERSTANDING THAT YOU WILL ARRANGE TO HAVE THIS DONE AT: DR OLIVIER

SIGNATURE OF NEW OWNER: _____ WITNESS FOR SOCIETY: _____

CONFIRMATION OF STERILIZATION:

VET: _____ SIGNED: _____

DATE: _____