

Wake County Co-Location

Shelter Registration and Agreement

I, the animal owner/agent signed below, request the emergency housing of the animal(s) being evacuated because of a pending or occurring disaster. I must be housed at this shelter during my pets stay. The animal owner/agent hereby releases the person or entity receiving the animal from any and all liability regarding the care and housing of the animal during and following this emergency. The animal owner/agent acknowledges that if emergency conditions pose a threat to the safety of the animal, additional relocation may be necessary, and this release is intended to extend to such relocation.

The animal owner/agent acknowledges that the risk of illness, injury or death to the animal during an emergency cannot be eliminated and agrees to be responsible for any veterinary expenses which may be incurred in the treatment of their animal for any injury or condition arising as a result of the animal's stay at the co-location shelter. At the co-location shelter, no veterinary services will be available. The owner/agent will need to transport their pet(s) to a private local veterinary clinic and authorize treatment for their pet(s). It is also required that the owner or his/her agent take responsibility for the care, feeding and maintenance of their animal(s).

The co-location shelter reserves the right to refuse to shelter any animals that, in the discretion of the shelter operator, may pose a danger to persons staying at the shelter.

Check out is required when departing from the shelter.

Abandonment of Animals - It is the policy of this shelter that the North Carolina General Statue 90-187.7, Abandonment of Animals, will be followed and any animal that is not removed from the shelter once it is announced the shelter is closing will be treated as abandoned.

Bite Animals - It is the policy of this shelter that the North Carolina General Statute 130A-196, Confinement of all biting dogs and cats, will be followed and any dog or cat that bites a person will be placed in quarantine for 10 days.

Animal Owner/Agent Signature		Date		
Animal Owner/Agent Name_				
Address				
City	State	_ Zip	Home Phone	
Cell Phone		Do you have	e your phone available now?	
Emergency Contact Name (not in shelter)			Phone	
Emergency Contact Person in	n Shelter			
(This person would provide c	are for your pets in th	e event an emei	rgency would occur)	
Name of person in charge of	animals care (must b	pe staying in the	e shelter and be over 18 years old):	