Currituck County Animal Services
Feral Cat Caregiver Registration

Registration is required to be considered a Feral Cat Caregiver in good standing with Currituck Animal Services TNR Program as provided for in the TNR Program Guidelines. Your registration, once approved, will assist Currituck County with tracking the progress of the Trap, Neuter, Return (TNR) program.

Please indicate your role(s): _____Caregiver _____Transporter _____Trapper _____Organization

Contact Information:

Primary Caregiver Name: _____

Address: _____

Primary Phone: _____ Emergency Contact: _____

Email Address: _____

Colony Information:

Colony Address: _____

Number of cats currently in the colony: _____ # of cats requiring TNR: _____

Year colony originally formed: _____ . Does this colony have multiple caregivers? __ YES __NO

Do others assist with the trapping/transport/release of your colony? If so, please list below:

_____

Do you currently care for more than one colony in Currituck County? ____YES ____NO   *if yes, please complete page 2.

Feral Cat Colony Caregivers **in good standing** with Currituck County Animal Services' TNR program shall be entitled to maintain and care for the feral cats by providing food, water, shelter, and other forms of sustenance, if the feral cat caregivers are registered with Currituck County Animal Services. Feral cat caregiver must take all appropriate and available steps to meet the terms and conditions of the provided program guidelines.

By signing below, I agree to act in accordance with the Currituck County TNR program guidelines to ensure the feral cats are spayed/neutered, vaccinated, and adequately care for by TNR Caregivers while working to abate nuisances or other public health or safety threats caused by the feral cats in colonies that I maintain.

Signature: _____ Date: _____

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COLONY LOCATIONS

Colony location: _____

Caregiver (if different than applicant): _____ Completed registration? ___ YES ___ NO

Number of cats in colony: _____ Number of cats requiring TNR? _____

Colony location: _____

Caregiver (if different than applicant): _____ Completed registration? ___ YES ___ NO

Number of cats in colony: _____ Number of cats requiring TNR? _____

Colony location: _____

Caregiver (if different than applicant): _____ Completed registration? ___ YES ___ NO

Number of cats in colony: _____ Number of cats requiring TNR? _____

Colony location: _____

Caregiver (if different than applicant): _____ Completed registration? ___ YES ___ NO

Number of cats in colony: _____ Number of cats requiring TNR? _____

Colony location: _____

Caregiver (if different than applicant): _____ Completed registration? ___ YES ___ NO

Number of cats in colony: _____ Number of cats requiring TNR? _____