

EARLY NEUTERING REGISTER

We can only accept a registration on behalf of a practice if this represents practice policy. Your name will not be displayed on the website but will be used as a point of contact for any queries. You are welcome to take the form away with you and return it to us by post once you've talked to colleagues.

Your name:

Practice name:

Practice address:

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Postcode:

Tel:

Website:

Lowest age at which the practice will neuter owned pet cats and those in charity care:

Lowest age at which the practice will neuter feral cats:

If returning by post, please send to:

**Cats Protection, Veterinary Department, National Cat Centre,
Chelwood Gate, Haywards Heath RH17 7TT.**

