



Application For Financial Assistance With Spay/Neuter

The Humane Society is committed to helping individuals offset the cost of spaying or neutering their animals in their care. The level of assistance will be determined by available funding at the time of the application with a minimum of 30% paid by the Humane Society to eligible applicants.

Please note a lifetime maximum of two animals per household are eligible under the program.

Name: _____ Telephone: _____

Address: _____

Description of animals needing assistance:

PET #1 Name: _____ CAT: Male / Female or DOG: Male / Female AGE: _____

PET #2 Name: _____ CAT: Male / Female or DOG: Male / Female AGE: _____

Reason for assistance request?: _____

Amount able to contribute to surgery?: _____

Approximate **household** income per year:

\$0 to \$29,999 \$30,000 to \$49,999 \$50,000 to \$79,999 \$80,000 or more

How did you hear about this program: _____

Signature of Applicant: _____ Date: _____

(valid for 60 days)

This application is a guideline to help ensure the fair and equitable distribution of assistance to those who can't afford the cost of the procedure. The Humane Society reserves the right to deny assistance to any applicant if false information is provided or if the animal's welfare is in question.

***Please return completed forms to revelstokehumanesociety@gmail.com or the Revelstoke Veterinary Clinic**

OFFICE USE ONLY

Signature of Veterinarian: _____

Date of Surgery: _____

RDHS Authorized Signatory & Name: _____

Comments: