

# APPLICATION FOR SPAY/NEUTER VOUCHER

Please Print Legibly and fill out the info for the person applying for the voucher

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

What kind of assistance are you on? \_\_\_\_\_

Have you ever gotten vouchers through Harvest Hills before? **YES** **NO**

**If yes, when?** \_\_\_\_\_

Do you have a regular veterinarian? **YES** **NO** If yes, who? \_\_\_\_\_

How many and what kind of animals are in the home?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Voucher(s) you are applying for: **DOG** **CAT**

Breed \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_

Please initial the following statements:

\_\_\_\_\_ I understand these vouchers are not transferable

\_\_\_\_\_ I understand that if I have gotten vouchers before from Harvest Hills I am not eligible for more vouchers, unless discussed with Harvest Hills Staff

\_\_\_\_\_ If I cannot use this voucher I will return it so Harvest Hills can use it for someone else in need

I Certify that the above information provided is true and accurate. I further certify that neither myself or anyone in my household has been charged with animal cruelty or neglect

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Approved**

**Denied**

HHAS Employee \_\_\_\_\_ Date \_\_\_\_\_