

# PAWS of NE Louisiana

## Spay/Neuter Assistance Application

*This program provides assistance to **low-income** pet owners. Priority is given to those who are most in need. Recipients will be asked to contribute an amount (co-pay) towards the cost of the spay/neuter. You must send this co-pay amount (see line 8 below) to us along with this application for processing and approval (allow approx 3-4 weeks for processing). In the event that you are not approved, your co-pay will be refunded to you in full.*

1. Please fill in the information below:

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

2. Provide the following information for each pet to be spayed/neutered. **You MUST list the weight of each pet.** If weight is not listed, the processing of your application will be delayed.

Pet's Name	Cat/Dog	Breed/Color	M/F	Age	Weight
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

3. Are your pets current on their rabies shots and yearly vaccinations?  Yes  No

4. What vet do you currently use? \_\_\_\_\_

5. Check all that apply to your situation (please include proof of assistance and mark through any sensitive information such as social security numbers)

Food Stamps  Medicaid  SSI  Public assistance  Disability  Unemployment

6. How many people live in your household? \_\_\_\_\_

7. What is your annual gross household income? \$ \_\_\_\_\_ (please include proof of income and mark through any sensitive information such as social security numbers)

8. How much can you contribute towards all spay/neuter surgeries (see note below)? \$ \_\_\_\_\_

**\*\* Please mail your co-pay amount from line 8 along with this application to the address below. We will notify you by mail when your application is received and approved.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

(By signing this application, I certify that the above information is true and accurate)

**PAWS, Attn: Spay Neuter Program, P. O. Box 15432, Monroe, LA 71207-5432  
Contact us at: 397-0007 or pawsonela@yahoo.com**