

PA P.E.T.S
SPAY / NEUTER APPLICATION - 2010

NAME _____		DATE _____	
Address _____		City _____	Zip _____
Phone # _____	Your County _____	Union _____	Snyder _____ Northumberland _____
<i>Other county? You are ineligible.</i>			
Please list the number of animals you are applying for:			
Male Cat (s) _____	Female Cat (s) _____	Male Dog (s) _____	Female Dog (s) _____
Pet name (s) _____			

INSTRUCTIONS:

____ 1. Select a Veterinary Hospital:

- | | |
|---|---|
| ____ Animal Care Hospital (524-7560) | ____ Mifflinburg Veterinary Clinic (966-7387) |
| ____ Companion Animal Hospital (374-2247) | ____ Selinsgrove Veterinary Hospital (374-5755) |
| ____ Elysburg Animal Hospital (672-2583) | ____ Sunbury Animal Hospital (286-5131) |
| ____ Lewisburg Veterinary Hospital (523-3640) | ____ Susquehanna Trail Animal Hospital (538-5538) |
| ____ Middleburg Veterinary Service (837-1212) | |

____ 2. Enclose proof of gross income for each person in your household with income.
(Most recent pay stubs, W2s, Tax Return, SS-SSI, and Unemployment statements, etc...)

____ 3. Enclose check or money order payable to "PA Pets" according to your
TOTAL GROSS HOUSEHOLD income per year - (Not adjusted gross)

No income - \$10,000	Your co-pay is \$0 per animal
\$10,000 - \$20,000	Your co-pay is \$10 per animal
\$20,000 - \$30,000	Your co-pay is \$20 per animal
\$30,000 - \$35,000	Your co-pay is \$30 per animal
\$35,000 and over	You are ineligible . Please contact the SPCA for a voucher.

____ 4. Mail this form, proof of income and check/money order to:
PA Pets, PO Box 64, Lewisburg, PA 17837

DO NOT MAKE YOUR VET APPOINTMENT UNTIL PA PETS CALLS YOU.

PA Pets covers the cost of surgery only. *Your vet may require a pre-surgical physical exam and charge you for pain medication, shots, etc.*

- This application is valid for **3 months** and up to **5 pet..** If not used, funds will not be returned unless requested.
- If you miss a vet appointment without 48-hour notice, you may lose PA PETS assistance.
- Your veterinarian reserves the right to revoke PA PETS approval for any reason.
- PA PETS charges a **\$25 fee for bad checks**, and a **\$3 handling fee** **if** you request money be returned to you.

I understand that PA PETS involvement is limited to providing funds for the spaying/neutering of dogs and cats. By my signature, I release PA PETS of all liability resulting from this surgery. I also agree to pay any additional expenses incurred by this procedure to my chosen veterinary practice.

Signature: _____ Date: _____

Questions? Call 1-866-472-7387 (toll free) and leave a message.