

Forsyth Humane Society
 61 Miller Street Winston Salem, NC 27104
 336-721-1303
Application for Spay/Neuter Assistance

Requirements and details for Spay/Neuter Assistance:

- *You must be an adult (at least 18) resident of Forsyth County.
- *You must fill out this application and return it and proof of income and residence to the Forsyth Humane Society.
- * **Incomplete applications will not be approved**
- *Please wait for approval before having the animal altered or you may not be entitled to reimbursement.
- *Once you are approved, you will receive a voucher with instructions on who to contact for an appointment.
- *You will be responsible for paying for additional tests or procedures.
- *State law requires that your animal have a current Rabies vaccination prior to being spayed/neutered. The FHS fund will provide vaccine allowances of up to \$10 for the Rabies vaccination and up to \$10 for the Distemper vaccination

IMPORTANT: Based upon your economic need, you may be approved for 1) Referral to a low-cost veterinary clinic (at your cost), 2) a 50% discount coupon or 3) a free spay/neuter voucher for use at approved veterinary clinics. **WHICH IS YOUR REQUEST? (1, 2 OR 3) _____**
 Please Print

Name			Driver's License #:		
Street Address					
City		State		County	
				Zip	
Telephone: (Home)		(Work)		(Cell and email)	
Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/>					
Number of Human Dependents: <small>(You count as one)</small>			Total Family Income per year \$: <small>(Please enclose proof of income and address.)</small>		
			<small>(Include income from all sources: welfare, alimony, unemployment, social security, Medicare, retirement, Worker's Compensation, other)</small>		
Do you have: Medicaid Card <input type="checkbox"/> AFDC <input type="checkbox"/> Welfare case number <input type="checkbox"/> WIC <input type="checkbox"/> Food stamp card <input type="checkbox"/> Other <input type="checkbox"/> (List)					
Place of employment					Years employed
Employer's address					
Employers Telephone			Job description/position		

Dog or Cat	Name	Age	Sex	Breed	Last Distemper Shot	Last Rabies Shot

Have you ever applied before: Yes No If yes, when? _____
 How did you hear about this fund?
 Que Pasa Newspaper Que Pasa Radio Thrifty Nickel Winston Salem Journal The Chronicle
 Spay/Neuter Clinic Rabies Clinic TV-WXII Furever Friends Public Library
 County Animal Shelter Website Forsyth Humane Society Veterinarian

Other (Please explain): _____

I understand the above requirements and certify that the information on this application is correct to the best of my knowledge

Signature: _____ Date: _____