

PAWS NELA SPAY/NEUTER ASSISTANCE APPLICATION

Name \_\_\_\_\_

Address (include street, city, zip) \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

PETS INFORMATION: ALL BLANKS ARE REQUIRED (ESTIMATE IF NEEDED)

ONLY 3 PETS PER HOUSEHOLD PER YEAR

<u>Pets Name</u>	<u>Male/Female</u>	<u>Dog/Cat</u>	<u>Breed</u>	<u>Age</u>	<u>Weight</u>
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REQUIRED INFORMATION

IF ANY INFORMATION IS MISSING FROM THE APPLICATION, YOUR APPLICATION WILL BE DENIED

YOU MUST PROVIDE COMPLETE INCOME INFORMATION FOR EACH MEMBER OF THE HOUSEHOLD

(2 Consecutive Pay stubs, Disability or Unemployment Awards Letter, SNAP or Medicaid Benefits Letter)

Monthly Household Income (Gross/Pretax) \_\_\_\_\_

Number of People in the Home \_\_\_\_\_

A MINIMUM COPAY OF 5.00 PER PET IS REQUIRED. This is to be paid to PAWS by cash, check, or money order with your application. If your application is not approved, your copay will be returned to you.

WHAT VET(S) OFFICE WOULD YOU LIKE TO USE? \_\_\_\_\_

Not all vets participate in our program, but we try to accommodate as best we can

Have you used our program before?  YES  NO

Are you a veteran?  YES  NO

Are you over the age of 65?  YES  NO

PLEASE ALLOW 4-6 WEEKS FOR PROCESSING. RUSH APPLICATIONS ARE NO LONGER AVAILABLE. YOU WILL BE CONTACTED BY PHONE, EMAIL, OR MAIL IF APPROVED.

PAWS NELA

P.O BOX 15432 MONROE, LA 71207

(318) 397-0007