

Forsyth Humane Society
61 Miller Street Winston Salem, NC 27104

Application for Spay/Neuter Assistance

Below are details for Spay/Neuter Assistance:

- *You must be a resident of Forsyth County.
- *You must fill out this application and return it 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 to pay for additional test 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

Please Print

Name			Age (Minimum age is 18)		
Street Address				Apartment #	
City		State		County	
Zip		Telephone: (Home)		(Work)	
(Other)		Marital Status: Single <input type="checkbox"/>		Married <input type="checkbox"/>	
Divorced <input type="checkbox"/>		Separated <input type="checkbox"/>		Number of Human Dependents: <i>(You count as one)</i>	
Total Family Income per year \$: _____ <i>(Forsyth Humane Society reserves the right to request proof of income)</i>			<i>(Include income from all sources: welfare, alimony, unemployment, social security, Medicare, retirement, Worker's Compensation, other)</i>		
Do you have: Medicaid Card <input type="checkbox"/>		Welfare case number <input type="checkbox"/>		Food stamp card <input type="checkbox"/>	
AFDC <input type="checkbox"/>		WIC <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 <input type="checkbox"/> | Que Pasa Radio <input type="checkbox"/> | Thrifty Nickel <input type="checkbox"/> | Winston Salem Journal <input type="checkbox"/> | The Chronicle <input type="checkbox"/> |
| Spay/Neuter Clinic <input type="checkbox"/> | Rabies Clinic <input type="checkbox"/> | TV-WXII <input type="checkbox"/> | Furever Friends <input type="checkbox"/> | Public Library <input type="checkbox"/> |
| County Animal Shelter <input type="checkbox"/> | Website <input type="checkbox"/> | Forsyth Humane Society <input type="checkbox"/> | | Veterinarian <input type="checkbox"/> |

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: _____