

**PART I – PROGRAM UNDER WHICH
PET OWNER IS CLAIMING ELIGIBILITY**

Please check the programs in which you are currently participating and supply us with a copy of the documentation verifying your participation in the program(s) indicated below.

- County Medical Services Program (CMSP)
- Food Stamps
- MediCal
- MediCaid
- Section 8 Public Housing
- Social Security Disability (SSD)
- Supplemental Security Income (SSI)
- Temporary Assistance to Needy Families (TANF)
- Unemployment
- Women, Infants and Children (WIC)

I hereby certify that the information I have provided is truthful and correct to the best of my knowledge. I authorize release of the above information for the purpose of determining my eligibility for the spay/neuter program. I recognize that many veterinarians require specific vaccinations prior to sterilization and I will be responsible for any additional services that they are required to perform.

Signature of Pet Owner

Date

PART II – PET REGISTRATION FORM

APPLICANT INSTRUCTIONS

Name of Pet _____

Type of Pet: Female Cat Female Dog
 Male Cat Male Dog

Breed/Color/Unique Traits _____

Age of Pet: _____

Is Pet Microchipped? Yes No

Where did you obtain this animal?

- Friend/Family FOAC HSOTC
- Other Shelter/Rescue Pet Store
- Sonora Cat Rescue Stray
- Other (specify) _____

As the owner of a cat or dog participating in the Spay/Neuter Low Income Voucher Program of the HSOTC, I understand that my pet will be receiving care from a Tuolumne County licensed veterinarian. I also understand that some veterinary practices may require additional tests in addition to the procedures mentioned above. It is my responsibility to ask whether the veterinarian requires other vaccines and tests when I call for the initial appointment. I understand that I am responsible to pay for these vaccines or tests. If I reject these tests, I understand that the veterinarian may elect not to perform the spay/neuter procedure. I understand that the veterinarian will be instructing me on pre-surgical and post-surgical care and that I need to follow these instructions. I also understand there are inherent risks involved in medical procedures and surgery.

Signature of Pet Owner

Date



SEND ALL MATERIALS TO:

The Humane Society of Tuolumne County
Attn: Spay/Neuter Voucher Program
PO Box 830 • Jamestown, CA 95327

If you have questions regarding this program
please call us at 209-984-5489.

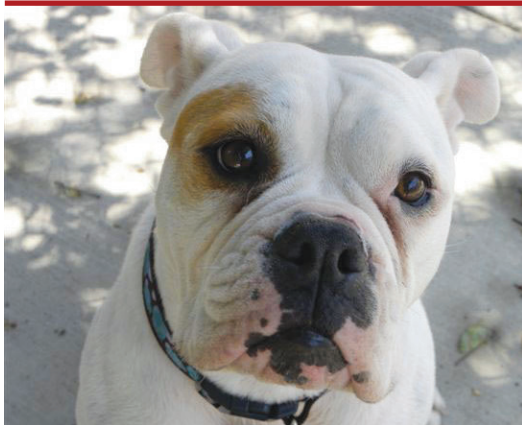
**SPAY & NEUTER
VOUCHER PROGRAM
AND APPLICATION**

THE HUMANE SOCIETY OF TUOLUMNE COUNTY



**WHEN WE WORK TOGETHER...
MORE LIVES ARE SAVED!**

**Stopping Pet Overpopulation
Starts with You!**



Spaying or neutering your pet is an important decision for pet owners. As animal lovers who value our pets, it is important to understand the impact of this decision. In every community, in every state, there are homeless animals. In the U.S., there are an estimated six – eight million homeless animals entering animal shelters every year. About half of these animals are adopted, and tragically, the other half are euthanized. Spaying or neutering is the only permanent, 100 percent effective method of birth control for dogs and cats.

Millions of pet deaths each year are a needless tragedy. By spaying or neutering your pet, you can be an important part of the solution. . . including improved health and longer life. . . reduced medical bills. . . no unwanted puppies or kittens and less aggressiveness, roaming, spraying and marking.

Remember, each and every spay or neuter makes a difference and brings us one step closer to ending the euthanasia of healthy, adoptable pets.

BECAUSE A PET IS FOR LOVE AND FOR LIFE!

The Spay & Neuter Group of the Humane Society of Tuolumne County (HSOTC) has a targeted spay/neuter low income voucher program aimed at assisting those residents most in need. The voucher(s) help reduce the cost of spaying or neutering the pets of qualifying Tuolumne County residents.

Helping to reinforce this program in our community, local participating veterinarians reduce their fees in accordance with the terms and conditions of the voucher. If an application is approved and funding is available, the voucher covers a portion of the cost with the balance covered by the client.

THE PROGRAM IN ACTION

If you meet the requirements of the program after mailing in your application, the HSOTC will send you a low income spay/neuter voucher redeemable during a specified time period for the spaying or neutering of your pet. You will also receive a list of veterinarians where these vouchers are accepted and the surgery can be performed.

VOUCHER VALUE	
Female Cat - \$50.00	Female Dog - \$50.00
Male Cat - \$20.00	Male Dog - \$35.00

WHAT ARE THE ELIGIBILITY REQUIREMENTS?

To be eligible for this program, a person must be a resident of Tuolumne County, be at least 18 years old and be a recipient of or have an income low enough to be eligible for one of the following programs:

- Food Stamps MediCal, MediCaid or County Medical Services Program (CMSP)
- Section 8 Public Housing
- Social Security Disability (SSD)
- Supplemental Security Income (SSI)
- Temporary Assistance to Needy Families (TANF)
- Unemployment
- Women, Infants and Children (WIC)

Acceptable proof of residency includes a rent receipt or lease agreement, utility bill or state issued identification. In addition, you must provide us with a copy of the documentation verifying your participation in the program(s) listed. Please send copies and not originals since these documents will not be returned to you.



INSTRUCTIONS FOR INCOME ELIGIBLE APPLICANTS

You can apply by mail or drop off the application at the HSOTC during normal business hours (9:00AM –3:00PM Monday - Saturday). This program, based on the funding available, limits the number of vouchers issued each month. Every eligible application received that is postmarked before the 15th of the current month will be considered. Those received after the 15th will go into the following month's review process. Dependant on the funding available and number of vouchers for any given month, qualifying applicants will receive their voucher by the first of the following month and the remaining applicants will receive a denial notice and must re-apply for the following month.

Part I – Complete the owner eligibility verification application and mail the completed form along with proof of eligibility and residency. A self-addressed stamped envelope must be included.

Part II – Complete the pet registration form (you must complete a separate pet registration form for each animal to be spayed or neutered). There is a limit of two vouchers per month and four vouchers per year per household. All vouchers are void after a 60-day period.

ELIGIBILITY VERIFICATION FOR LOW INCOME SPAY/NEUTER PROGRAM APPLICATION

APPLICANT INFORMATION

APPLICANT INSTRUCTIONS:

- Complete Part I, Part II and this form.
- Attach a copy of your driver's license or photo ID.
- Attach a copy of your proof of eligibility.
- Sign where indicated.
- Mail to the **The Humane Society of Tuolumne County**, Attn: Spay/Neuter Voucher Program, PO Box 830, Jamestown, CA 95327 and include a self-addressed stamped envelope.
- Fill out a separate application for each pet to be spayed or neutered.

Name of Pet Owner (Last, First, M.I.) _____

Mailing Address _____

City, State, Zip Code _____

Home Telephone _____

Cell Phone _____

Work Telephone _____

Social Security # (Last four digits) _____

Date of Birth (Month/Day/Year) _____