



Animal Resource Foundation

PO Box 253
Center Point, IA 52213
www.arfiowa.org
www.facebook.com/arfiowa

SPAY & NEUTER INCENTIVE PROGRAM (SNIP) APPLICATION

Animal Resource Foundation's mission is to eliminate pet overpopulation by offering spay and neuter assistance programs. Please keep the following points in mind while completing this application.

1. Please print neatly, so we can to read it. If we can't read your writing, we can't help you.
2. Please answer all questions. We do not share your individual information with anyone.
3. Financial questions help us apply for and obtain grants to offer this program.
4. You **MUST** provide your email address. We will use this to send your voucher. We will add you to our newsletter list so you know about upcoming events and any special offers we may have.
5. We do not provide **FREE** surgeries. You are required to make a copay for services.
6. This voucher will cover spay/neuter, shots (if needed), and ear tip (**REQUIRED**) for outside cats.
7. We use Iowa Humane Alliance in Cedar Rapids, IA for all surgeries unless you are part of the C&W spay/neuter clinics for cats. (C&W is by special invitation only as they are held only once a month.)

Send completed application to: Email address: sandy@arfiowa.org
Mailing address: ARF Iowa - PO Box 253 - Center Point, IA 52213

How did you hear about our program? _____

CONTACT INFORMATION

Your email address: _____

Your voucher will be emailed to you. We no longer mail vouchers using the post office.

What county do you live in? _____

PERSONAL INFORMATION

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Employed: Full-time Part-time Unemployed Other _____

How many adults live in your home? _____ How many children live in your home? _____

What is your total monthly household income? (Please include all sources.) \$

Which of the following benefits do you receive? *Please check all that apply.*

Social Security Medicaid/Medicare Unemployment Food Stamps WIC

Please describe your situation and why you are asking for spay and neuter assistance:

PET/ANIMAL INFORMATION

How many dogs do you have? _____ How many dogs are fixed? _____

How many indoor cats do you have? _____ How many indoor cats are fixed? _____

How many outdoor cats do you have/feed? _____ How many outdoor cats are fixed? _____

Fill out one row below for every animal you want to have fixed. Use page three if you need more lines.

Pet Name	Type	Does this pet live	Breed and Color	When was this animal last seen by a vet?	Male or Female
	<input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Bunny	<input type="checkbox"/> Inside Only <input type="checkbox"/> Inside/Outside <input type="checkbox"/> Outside Only		<input type="checkbox"/> Under a year <input type="checkbox"/> 1 - 5 years <input type="checkbox"/> Never <input type="checkbox"/> Don't Know	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Not Sure
	<input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Bunny	<input type="checkbox"/> Inside Only <input type="checkbox"/> Inside/Outside <input type="checkbox"/> Outside Only		<input type="checkbox"/> Under a year <input type="checkbox"/> 1 - 5 years <input type="checkbox"/> Never <input type="checkbox"/> Don't Know	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Not Sure
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