



Friends for Life Animal Rescue  
952 W. Melody Avenue  
Gilbert, AZ 85233

Dear Pet Companion:

You requested an application for Friends for Life Animal Rescue's Low Cost Spay /Neuter, Microchip and DHPP Vaccination assistance program. Please be sure to complete the steps outlined below:

- Fill out the attached application completely and attach copies of the proper paperwork to show qualifications. **Please be sure to block out any social security numbers shown on any attachments.**
- Please print clearly.
- **A minimum donation of \$15.00 is required for the Spay/Neuter surgery, or \$10 for the microchip program. Note that there is no minimum donation required for the DHPP vaccination program, but any donation is appreciated.** If you do not qualify for our program, your donation will be returned to you.
- Mail the completed application, donation, and copies of the appropriate documentation to the address at the top of this letter or drop off the application at our adoption center any time we are open. Facility hours: Tuesday and Friday from 10 am to 2 pm, Wednesday and Thursday from 3 pm to 7 pm, and Saturday from 10 am to 5 pm. We are closed Sunday and Monday. If you bring the application in person, in most cases we can provide your certificate at the same time.

**Please note: your animal's rabies vaccination is required by law (for dogs) and must be up-to-date at the time of your appointment. If it is not current, you shall be responsible for the cost of the rabies vaccination. The rabies vaccination will be handled by the clinic performing the surgery.**

- One application per animal. If you have more than one animal, you must submit a separate application, donation and appropriate documentation for each. Maximum **TWO** animals per household per year.
- If you miss your appointment or your certificate expires, you must re-apply to Friends for Life. Application donations **cannot** be refunded if you miss your appointment or your certificate expires.
- Please note: the veterinarians participating in this program have the right to refuse performing procedures on your animal if they feel it is not in the best interest of the animal. Reasons for refusal of service may include, but are not limited to, age, poor health, pregnancy. There may also be additional charges from the vet for blood-work if the animal is older.

**Friends for Life Animal Rescue – Low Income Services Program Application**

Applicant Name: \_\_\_\_\_

Name of Animal: \_\_\_\_\_

Address: \_\_\_\_\_

Dog / Cat: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Male / Female: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Breed: \_\_\_\_\_

Work or Cell Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Color: \_\_\_\_\_

I request services to be provided to my pet through the Friends for Life Animal Rescue Spay / Neuter Program supported by donations. I certify that I qualify for this program as my total annual household income is less than \$45,000 per year. If I do not qualify for this Low Income program, Friends for Life Animal Rescue will return my donation to me.

**APPLICANT – PLEASE CHECK APPROPRIATE LINES FOR PROOF OF QUALIFICATION AND SERVICES REQUESTED:**

**Proof of Qualification (must provide one):**

\_\_\_\_\_ Copy of paycheck stub

\_\_\_\_\_ Copy of last year's W2

**Services Requested (check all that apply):**

\_\_\_\_\_ Spay/Neuter voucher/certificate (\$15 donation)

\_\_\_\_\_ DHPP vaccine (no donation needed)

\_\_\_\_\_ DHPP BOOSTER vaccine (no donation needed)

\_\_\_\_\_ Microchip (\$10 donation)

**For Spay/Neuter certificate**, I agree to a donation of \$15.00 payable to Friends for Life Animal Rescue in return for the services provided for my pet. I understand this does not cover vaccination charges and that I shall be responsible for the cost of any required vaccinations.

**For a DHPP vaccine/booster certificate**, There is no donation needed in return for the services provided for my pet. I understand this only covers a DHPP vaccine and that I shall be responsible for the cost of any other required vaccinations (eg Rabies vaccine, as required by law).

**For a microchip certificate**, I agree to a donation of \$10.00 payable to Friends for Life Animal Rescue in return for the services provided for my pet. I understand this does not cover vaccination charges and that I shall be responsible for the cost of any required vaccinations.

**I declare that I am the owner of the above named animal or I am responsible for it and have the authority to execute this agreement. I agree that the spay/neuter voucher is available for a maximum of two pets per household per year. I authorize the performance of the sterilization procedures for the above named animal and I understand there is a risk of unforeseen complications. I authorize the use of anesthetics as may be deemed advisable and surgical or therapeutic procedures as may be determined necessary. I authorize the vaccination of the above named animal in accordance with the needs of the animal as determined by the attending veterinarian. I understand that the sterilization procedure cannot be performed on this animal without some vaccinations. I agree that I am responsible for the cost of such vaccinations.**

**I agree to indemnify and hold harmless the veterinarian and Friends for Life Animal Rescue from and against any and all liability arising out of the performance of any of the procedures referenced above.**

Agreed and acknowledged this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Applicant's Signature: \_\_\_\_\_

\* \* \* \* \*

**For Office Use Only**

Received Check # \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ as a suggested donation

Certificate No. \_\_\_\_\_ issued on \_\_\_\_\_ (date). Expiry: \_\_\_\_\_ (date)