

♥DIRECTIONS FOR SPAY/NEUTER INCENTIVE PROGRAM♥

CHECKLIST

- _____ 1. Choose from the enclosed list of participating veterinarians and pick the veterinarian & the price YOU will pay that vet for the spay or neuter surgery.
- _____ 2. Complete the application. One application per pet is required. You may make copies.

_____ 3. Return application to: **STRAY NO MORE** *** Be sure to include a self
P. O. Box 6106 addressed, stamped envelope.
Lake Worth, FL 33466
(561) 683-4537 www.straynomore.org

- _____ 4. Upon approval, STRAY NO MORE will return a certificate to you and a copy to the veterinarian you chose. You must have confirmation #.
- _____ 5. **You will then call the veterinarian to make an appointment.**
You have two months to have this surgery completed.
- _____ 6. The day before your pet's surgery 1) Give your pet a very good bath. (no fleas or ticks). 2) Do not give food/water ? hours prior to surgery. Check with vet.
- _____ 7. **Bring proof of vaccinations or have your pet vaccinated** at the veterinarian. Some vets require vaccinations prior to surgery. Please check your vet's notes. In addition, some vets require heartworm test for dogs, or feline leukemia and aids test for cats. **It is your responsibility to know what is required.** These tests are VERY important.
- _____ 8. Please pre-pay (the price stated in the flyer and on your certificate) the veterinarian at time of drop off. ***These vets have generously lowered their normal prices for this incentive program.*** Stray No More, Inc. will also be subsidizing an additional part of the surgery price. Check with the vet to see what type of payment is needed. (charge cards, checks, cash).
- _____ 9. Check with the vet to get post-surgery directions and pick-up time as well as any necessary follow-up.
- _____ 10. **Congratulate yourself** for a wise decision to have your pet spayed/neutered. Pass this valuable information on to anyone who may need it!!! **This program is made possible through donations.** People like you keep this program alive.
If you would ever like to make a donation to help others with their pet's surgery fees, the donation is tax-deductible.!

**If you are unable to afford these prices, Animal Care and Control has the Spay Shuttle.
If you are on federal assistance, this program is free for your pet.
Call 233-SPAY for the location.**

THE ONLY ANSWER TO THE PET OVER-POPULATION PROBLEM IS TO HAVE YOUR PET SPAYED OR NEUTERED and COMMIT TO YOUR PET FOR A LIFETIME! Remember, our pets depend completely upon us for their emotional, and physical needs.

REDUCED SPAY/NEUTER APPLICATION FORM

Please follow the directions on reverse side. This program is specifically designed for people requiring financial assistance. You must return this to STRAY NO MORE for a confirmation # BEFORE you can make an appointment. Also include a self addressed stamped envelope for a speedy return.

Your name: _____ Telephone #: _____

Address: _____ City: _____ FL. Zip: _____

Pet to be altered Name: _____ dog/cat (circle) Breed: _____
(No feral cats)

Spay (female): _____ Neuter (male): _____ (check which one applies)

Age: _____ Weight: _____ Vaccinated at: _____ Date: _____

Heartworm Test at: _____ or Feline Aids/Leukemia Test: _____

[Please bring proof of vaccinations, and test]

Please write the veterinarian you choose to spay/neuter your pet and the agreed upon fee for the surgery. Choose one from the list.

****Veterinarian chosen:**

DISCOUNTED price you are paying veterinarian for spay or neuter: \$ _____.

(Remember to check with the veterinarian about any other costs that may apply)

I, _____, need the financial assistance of Stray No More.

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Please return to: Stray No More, Inc. P.O. Box 6106 Lake Worth, FL 33466

You will then receive this application back with a confirmation # for the surgery. Important:

PLEASE CALL THE VET to set-up an appointment. This certificate is valid for two months from the date of mailing. YOUR animal must be vaccinated prior to surgery. Your pet may also need a heartworm or feline aids/leukemia test. (This is the owner's complete responsibility). Your animal must be clean, and free of fleas/ticks.. Check with the vet in regards to your pet's fasting prior to surgery. Please have your pet on a leash, or in a carrier when arriving at the veterinarian's office.

To be completed by Stray No More, Inc. upon acceptance into program.

Date mailed to owner: _____ * Confirmation #: _____

Name of Pet: _____ Spay/Neuter Offer good until: _____

(Call today to make appointment!)

Vet chosen to perform operation: _____ Telephone #: _____

Price you are paying vet for spay/neuter: _____ (discounted up to 70% !!)

Remember you are responsible for office exam, (if one applies) vaccinations, tests, medicine, or any other cost necessary for your pet's health. PLEASE CHECK WITH THE VET.

Stray No More's co-payment to this vet: \$20.00 (Stray No More pays part of your pet's surgery!)

**** Please note- only 3 pets per household may use this special program per year!**

THIS PROGRAM IS NOT FOR PETS ADOPTED FROM RESCUE ORGANIZATIONS OR SHELTERS. Animal Care and Control's regulations states, "Rescue groups shall provide for the sterilization of all adopted dogs and cats. Animals will be sterilized prior to release or no later than thirty (30) days after the agency receives the animal, except for those that are a surgical risk."