



Spay-Neuter Coalition of New Mexico
PO Box 2352 Los Lunas, NM 87031
505-922-5490
spayneuternm.org

Spay or Neuter Voucher Program Application

Full Name: _____

Physical Address: _____

Email: _____

Phone Number: _____

Current Annual Income: _____

Pet's Name: _____

Pet's Age: _____

Pet's Weight: _____

Pet's Breed(s): _____

Pet's Color and Identifiable Markings: _____

Is your pet current on vaccines, if so, which ones? _____

What veterinary practice do you use? _____

When was the last time vaccines were given? _____

Is your pet human or animal aggressive? _____

Does your pet live indoors or outdoors? _____

If outdoors, is your pet chained? _____

Has your pet been bred, if so, how many times? _____

If your pet is a female, is your pet in heat or pregnant? _____

If your female has been bred, when was the last time she gave birth? _____

If your pet is a male, have both of his testicles dropped? _____

Does your pet ever had any health issues? _____

Any abnormal behavior, coughing, sneezing, diarrhea or vomiting? If yes, explain? _____

Has your pet had any health issues? If yes, please explain? _____

For the safety of your pet, please be completely honest in your answers to the above questions. The health of your pet is very important to us, so we have to know about any current or previous health issues. There are risks that come along with any procedure involving anesthesia. These risks can range from nausea and diarrhea to death. While serious complications are rare, they can occur, especially if your pet has undiagnosed illnesses.

We can only do pets up to the age of four through our approved vet; however, we can send your personal vet a voucher for the amount we would pay our approved vet.

Your co-pay will range from \$30 to \$50 if you go through our approved vet and will cover the surgery, vaccines and long lasting pain shot. You understand that we, the Spay-Neuter Coalition of New Mexico do not cover any type of aftercare or complications, such as infection. It is your responsibility as the owner to carefully follow all aftercare instructions as provided by the vet.

By signing this document, you attest that you are the legal owner of the pet. By signing this document you agree to hold harmless the Spay-Neuter Coalition of New Mexico, it's directors and volunteers for any and all complications that may arise directly or indirectly from the vaccines and/or spay or neuter procedure. By signing this document, you also agree that all information you gave is true and correct to the best of your knowledge.

Signature of Legal Owner

Date

Printed Name of Legal Owner

Do Not Write Below this line

Approved by:

Cost of Surgery:

Proof of Income Received:

Extra Services:

Document type:

Veterinary Clinic:

Voucher Amt:

Veterinary Clinic Contact: