

**SANTA ANA FRIENDS FOR THE ANIMALS (SAFA)
SPAY/NEUTER VOUCHER APPLICATION**

Date _____

Name _____ Address _____

Santa Ana, CA. Zip Code _____ Hm. Phone# _____ Day Time Phone# _____

Animal Name _____ Cat _____ Dog _____ Breed _____ Color _____ Sex: M / F (circle one)

Age _____ Weight _____ Pregnant: Y / N (circle one) Dog License # if any _____

Our funding providers require that we collect the following information; this information **will not** affect your eligibility for a voucher.

Household Size <input checked="" type="checkbox"/> one	Household Income <input checked="" type="checkbox"/> one that corresponds to household size				
1 person <input type="checkbox"/>	\$0-\$16,550 <input type="checkbox"/>	\$16,551-\$27,550 <input type="checkbox"/>	\$27,551-\$44,050 <input type="checkbox"/>	\$44,051 and above <input type="checkbox"/>	
2 persons <input type="checkbox"/>	\$0-\$18,900 <input type="checkbox"/>	\$18,901-\$31,500 <input type="checkbox"/>	\$31,501-\$50,350 <input type="checkbox"/>	\$50,351 and above <input type="checkbox"/>	
3 persons <input type="checkbox"/>	\$0-\$21,250 <input type="checkbox"/>	\$21,251-\$35,400 <input type="checkbox"/>	\$35,401-\$56,650 <input type="checkbox"/>	\$56,651 and above <input type="checkbox"/>	
4 persons <input type="checkbox"/>	\$0-\$23,600 <input type="checkbox"/>	\$23,601-\$39,350 <input type="checkbox"/>	\$39,351-\$62,950 <input type="checkbox"/>	\$62,951 and above <input type="checkbox"/>	
5 persons <input type="checkbox"/>	\$0-\$25,500 <input type="checkbox"/>	\$25,501-\$42,500 <input type="checkbox"/>	\$42,501-\$68,000 <input type="checkbox"/>	\$68,001 and above <input type="checkbox"/>	
6 persons <input type="checkbox"/>	\$0-\$27,400 <input type="checkbox"/>	\$27,401-\$45,650 <input type="checkbox"/>	\$46,651-\$73,050 <input type="checkbox"/>	\$73,051 and above <input type="checkbox"/>	
7 persons <input type="checkbox"/>	\$0-\$29,300 <input type="checkbox"/>	\$29,301-\$48,800 <input type="checkbox"/>	\$48,801-\$78,050 <input type="checkbox"/>	\$78,051 and above <input type="checkbox"/>	
8 or more persons <input type="checkbox"/>	\$0-\$31,150 <input type="checkbox"/>	\$31,151-\$51,950 <input type="checkbox"/>	\$51,951-\$83,100 <input type="checkbox"/>	\$83,101 and above <input type="checkbox"/>	

Please place a check mark in the appropriate boxes for ALL three questions:

- Are you Hispanic? Yes No
- Please one that best describes you:
 White Black/African American Asian American Indian/Alaskan Native Hawaiian/other Pacific Islander
 American Indian/Alaskan Native & White Asian & White Black/African American & White
 Amer. Indian/Alaskan Native & Black African Amer. Multi Racial
- Are you a female head of household? Yes No

Our spay/neuter voucher program was created to assist those individuals with limited funding that could not afford the cost normally associated with spay/neuter. For this reason we do not require a “co-payment”, however our funding is limited, and in order to stretch our dollars and save as many lives as possible, we request that you contribute what you can afford as a co-payment for the surgery. If you can help us save more lives please make the co-payment directly to the veterinarian or to SAFA.

Voucher is null and void if declawing, tail docking, ear cropping, or any other mutilation procedure is to be done at the time of spaying or neutering.

RELEASE AND WAIVER OF LIABILITY

THE SANTA ANA FRIENDS FOR THE ANIMALS (hereinafter “SAFA”) has developed a program whereby I may receive a voucher to take my animal to a participating veterinarian for free spay/neuter services. (hereinafter “said Voucher Program”)

SAFA is also offering Avid® identification microchips. The cost of the microchip is \$24.00 including registration in PETtrac® national registry and injection by the veterinarian at the time of spay/neuter surgery. MICROCHIP PURCHASE IS OPTIONAL AND NOT REQUIRED to receive a spay/neuter voucher. If you wish to purchase a microchip please include a check with this application made payable to SAFA.

IN CONSIDERATION of participation in said Voucher Program, I hereby acknowledge, agree and represent the following:

- I UNDERSTAND THE SPAY/NEUTER SURGERY AND THE MICROCHIP IMPLANT PROCEDURES HAVE THE RISK OF COMPLICATIONS, INCLUDING DEATH, TO MY ANIMAL. I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF SICKNESS, INJURY OR DEATH of my animal due to my participation in said Voucher Program.
- I understand participation by any veterinarian in said Voucher Program is not a representation by SAFA of that participating veterinarian’s skills or a warranty of its services.

I HAVE READ AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER OF LIABILITY, and further agree that no oral representations, statements or inducement apart from this written agreement have been made. I further attest that I am a resident of the City of Santa Ana and the above listed dog or cat is my pet.

Date _____ Signature _____ How did you hear about this program? _____

SAFA USE ONLY-Representative reviewing/verifying application:

Signature _____ Issue date _____

Spay/Neuter Authorization # _____ Microchip Authorized Yes / No Check # _____ or Cash