



S.N.I.P
(Spay/Neuter Incentive Program)
DOG REQUEST FORM

Thank you for your interest in having your dog(s) spayed/neutered (s/n)! There are too many pets without homes in Hood County and by having your dog(s) s/n, you will help to reduce this problem. Our funds are limited but we want to help those pet owners who truly need financial assistance. **If you can afford to pay for the s/n surgery yourself, please do not apply.** You will find Low cost spay/neuter options at www.HoodCoAnimalLovers.org or call 817-326-3655.

To request a spay/neuter, complete this form. This is a request form only, **not an approval** for a s/n. **Please note: A \$25 check payable to HALO must be attached to this application. This offer is good for Hood County residents only. Proof of residency will be required.**

Email completed form to: HoodCoAnimalLoversOrganization@gmail.com
or Mail application & check to: HALO/SNIP-PO Box 294, Granbury, TX 76048

Your Name: _____ Email: _____

Cell Phone: _____ Home Phone: _____

Address: _____ County of Residence: _____

Occupation: _____ Employer's name: _____ Work Phone: _____

Please indicate the reason(s) you need financial assistance with spay/neuter services:

- Individual Income of Less than 25k a Yr Married Couple Income of Less than 40k a Yr
 Elderly Disability Student Medicaid Recipient Too Many Bills
 Other. Please explain _____

INFORMATION ABOUT THE DOG(S) TO BE SPAYED/NEUTERED

Limit 2 dogs per household

DOG #1 Male Female **Name of Dog:** _____

Age: _____ **Breed:** _____ **Color:** _____ **Weight:** _____

DOG #2 Male Female **Name of Dog:** _____

Age: _____ **Breed:** _____ **Color:** _____ **Weight:** _____

I am the Owner of the Dog(s) Yes No

I am the Caregiver of the Dog(s) Yes No

Can you donate more than \$25 for this service? Yes No

If you can donate more, how much would you like to donate? _____

Has your dog ever been to a vet? Yes No If so, when? _____ Name of Vet: _____

Has this dog ever given birth? Yes No

If she has had litter(s), what happened to the litter(s)? _____

Is the dog currently Pregnant? Yes No Is she in danger of becoming Pregnant? Yes No

Is the dog currently in Heat? Yes No

Do you have any other un-spayed/un-neutered dogs or cats in your home? Yes No

If so, do you need financial help with getting them spayed or neutered? Yes No

Comments:

*By signing below I hereby certify that the foregoing information is true and correct and that I have not omitted anything which would make my application false or misleading. I will not hold HALO – Hood Co Animal Lovers Organization, their veterinarians, directors, officers, or volunteers liable for any complications arising from the vaccinations, spay or neuter or medical procedures. **Furthermore, I understand a \$25 fee is required in advance for final approval of my application.***

My **electronic or handwritten signature** is deemed my official acknowledgement and request for consideration into the HALO SNIP program.

Sign here: _____ Date: _____