



PALNV  
4155 N Rancho Drive #150  
Las Vegas, NV 89130  
(702) 629-6351

## Community Cat/Kitten Sponsorship Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Cats Name: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

### Sponsorship Levels:

Kitten	[ ]\$ 120 Year Or [ ]\$ 10 Month	Feeds 2 Cats
Siamese	[ ]\$ 180 Year Or [ ]\$ 15 Month	Felv/FIV Test for 1 Cat
Russian Blue	[ ]\$ 240 Year Or [ ]\$ 20 Month	Feeds 4 Cats
Snowshoe	[ ]\$ 300 Year Or [ ]\$ 25 Month	Vaccinates 2 cats
American Shorthair	[ ]\$ 600 Year Or [ ]\$ 50 Month	Spay/Neuter 2 Cats
Maine Coone	[ ]\$1200 Year Or [ ]\$100 Month	Feeds 10 Cats



**Paid By:** Check # \_\_\_\_\_ Credit Card: [ ]VISA [ ]M/C [ ]American Express [ ]Discover

### Credit Card Payment Authorization:

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ CVC/Security Code: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

I authorize PALNV to process a payment in the amount of \$ \_\_\_\_\_ for the above Membership.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_