	How did you have about our programs? (Places shock all that apply)
	How did you hear about our programs? (Please check all that apply) Email ()
	Veterinarian (
	Posted Flyer
	Facebook
	Friend or family member ()
	Tri-County Animal Shelter (
Animal	Other ()
Welfare OF THE Albemarle	Animal Control Officer
Region Fyery day!	
i = Every day.	P.O. Box 203 · Hertford, NC 27944 · Toll Free 866-711-9292 · www.awarenc.org
	Application for CAT Spay/Neuter Voucher
	Residents of Chowan, Gates and Perquimans Counties Only
Complete on	e form for each cat. You may mail this form and all required documents to:
	AWARE, P. O. Box 203, Hertford, NC 27944
	OR scan them and Email to awarenc@yahoo.com
IE VOLL WOLL	LD LIKE TO RECEIVE YOUR VOUCHER AND INSTRUCTIONS BY EMAIL, PLEASE CHECK HERE
IF TOO WOOD	LD LIKE TO RECEIVE TOOK VOOCHER AND INSTRUCTIONS BY EWAIL, PLEASE CHECK HERE
ALL APPLI	CANTS MUST PROVIDE PROOF OF RESIDENCY. Be sure to include a copy of your driver'
	license, voided check <u>OR</u> utility bill.
Name	
Address	City/State/Zip
Phone	Email
Cat Name	Male Female Age
Upon approv	val of your application, we will send you one of the following spay/neuter vouchers by return
mail along w	ith appointment instructions and a list of participating veterinary offices. The voucher must
be presented	to the veterinary hospital at time of surgery.
Check here _	to APPLY for a "CatSNIP" \$80 Female/Spay or \$40 Male/Neuter Discount VOUCHER to
be applied to	the cost of surgery at participating veterinary offices. This program available to ALL residents
of Chowan, G	Gates and Perquimans Counties. Upon receipt of your (1) APPLICATION and (2) PROOF OF
RESIDENCY, a	a "CatSNIP" voucher will be mailed to you. In addition to "CatSNIP" voucher discount,
veterinary of	fices will provide an additional discount to AWARE clients for spay/neuter services.
	OR
If you are a	recipient of Medicaid or Food Nutrition benefits (SNAP, food stamps), you are qualified to have
	your cat spayed or neutered at participating veterinarians FREE!
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Check here _____ to APPLY for a Free "CatFIX" VOUCHER. Upon receipt of your (1) APPLICATION, (2) PROOF of RESIDENCY, and (3) PROOF of FINANCIAL ASSISTANCE (copy of Medicaid or SNAP/food stamp card, a "CatFIX" voucher and appointment instructions will be sent to you. If the cat does not have a current vaccination status, including a rabies certificate to prove ownership, the cat will receive the required vaccination and owner will be responsible to pay \$5 for a rabies shot at the time of surgery.